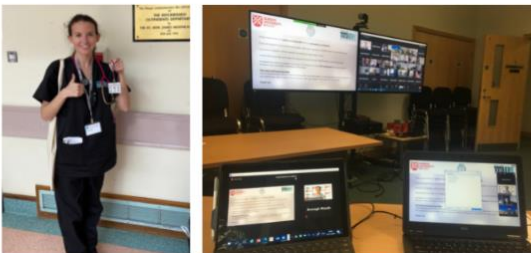


# Annual Quality Report

2020 - 2021



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## Foreword

It is our pleasure to introduce NIMDTA's Annual Quality Report for 2020-21.

The context of the pandemic response has provided challenge to how we deliver our brief. We are very proud of the innovative work delivered at this time. In this report, you will learn how NIMDTA ensures achievement of high quality is central to all we plan and do.

NIMDTA **transforms culture** by embedding the maintenance and improvement of quality in strategic and business plans and on the agenda for all meetings. Excellence is promoted throughout the organisation (recruitment, induction, engagement and development), in our interactions with Trainees (education and employment) and externally by sharing good practice (NHS Education for Scotland Annual Conference; Royal College of Pathologist's Scottish Council; Developing Excellence in Medical Education Conference; National Careers Conference). The importance to NIMDTA of working closely with partners is shown in the forums we have set up (NIMDTA Staff; Trainee; Recognised Trainer; Lead Educator; Directors of Medical Education), in our extensive engagement with the Health and Social Care (HSC) System and our wide-ranging participation in many national groups.

**Strengthening the workforce** is NIMDTA's key role. Education and Training is provided at all levels –

- Board (workshop programme)
- Clinical Facilitators
- Dentists and Dental Care Professionals
- Education Management Staff (Staff Development Programmes)
- Educators (Flagship events; Faculty Development courses; support for educational qualifications)
- GP Appraisers
- Lay Representatives
- Recognised Trainers (STATUS: Achieving and Maintaining Recognition; GP Learning and Teaching)
- Senior Management (Away Days and Education Forum) and
- Trainees (programme-specific; iQUEST; EQUIP; ENGAGE; academic and leadership programmes; Representative and Ambassador Training).

In addition, we provide support for Trainees through our team of Education Programme Leaders and our Professional Support Unit (one-to-one meetings; careers advice; mentoring; coaching; education assessment). We support staff members through our Team Leaders and Staff Health and Wellbeing programme as well as by providing access to counselling and

Occupational Health Services. We provide Educators and Trainers with induction, training and support from Senior Educators.

A focus on **measuring improvement** is fundamental to NIMDTA's Strategic and Business Plans, making use of Key Performance Indicators and corporate score card. We meet annually with the leadership teams of each of the five HSC Trusts to review performance. We use GMC data to monitor Trainee success in recruitment, professional examinations and progression. We promote success for Trainees at interviews through our Peer Interview Programme and at examinations through our Education Fellows. We monitor Trainee experience using NIMDTA, GMC and College surveys as well as visits and focus groups. NIMDTA seeks to improve the quality of Trainee experience and education through a systematic approach to programme review and our Placement Quality Initiative. We quality assure the appraisals we carry out for all the GPs in NI.

We **raise standards** by working in partnership across the HSC and the UK to define standards, develop guidance, introduce and implement initiatives, monitoring and reviewing progress. NIMDTA-specific initiatives include flagship educational events for Educators and Trainers (Clinical Education Day; Professional Support Day) and Trainees (Educational Excellence Day; Research for Clinicians Day). NIMDTA provides specific academic, leadership and quality improvement training programmes (Clinical Academic Training; ADEPT; ENGAGE; EQUIP). Progress in raising standards is tracked using surveys, visits, forums, internal audits, and the review of reports from Lay Representatives and external experts. We recognise achievement of excellence by announcements in NIMDTA newsletters, social media and website as well as at specific award events (EQUIP Celebration; ENGAGE Showcase; Educational Excellence Day).

NIMDTA is strongly committed to **integrated care**. We recruit, allocate and oversee Trainees who provide day-to-day frontline care in primary care and across the HSC Trusts. In addition, NIMDTA participates in transformation initiatives (Day Case Elective Care Centres; Emergency Care Regional Collaborative) and inquiry recommendation implementation groups (Inquiry into Hyponatraemia Related Deaths). We support strategy implementation for the HSC workforce (Single Employer Initiative), leadership development (Development Professional Leadership) and enhancement of the quality of medical education. We organise joint events with QUB, coordinate the NI HSC Postgraduate Education Forum and host the NI Centre for Pharmacy Learning and Development.


The **COVID-19 pandemic** has had a significant impact on every area of NIMDTA's activities and we have strongly supported the HSC's response to COVID-19.

It has been necessary to stand down or postpone many educational activities. Postgraduate Educators have stepped back from educational roles to support the clinical response to the pandemic. Hundreds of Trainees have redeployed, across specialty boundaries into

different units and hospital sites, to support the HSC response to COVID-19. Academic and Out of Programme Trainees have returned to full time clinical work in HSC Trusts.

Over 200 final year Medical Students have graduated early, been registered early with the GMC and NIMDTA has organised their early entry into the HSC workforce as Foundation Interim Year 1s (FiY1). We have transitioned our staff successfully to working from home and conducting all our meetings using teleconferencing and videoconferencing.

Despite all this disruption, we have remained committed to maintaining and improving the quality of our services.



Mr Garry McKenna  
Interim Chair, NIMDTA Board



Mr Mark McCarey  
Chief Executive

## The Role of NIMDTA

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is an Arm's Length Body sponsored by the Department of Health (DoH) to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA also seeks to serve the government, public and patients of Northern Ireland by providing specialist advice, listening to local needs and having the agility to respond to regional and national requirements.

NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training throughout Northern Ireland. NIMDTA endeavours to attract and appoint individuals of the highest calibre to recognised training posts and programmes. NIMDTA encourages doctors to train and remain in NI so that Health and Social Care (HSC) has a highly competent medical and dental workforce with the essential skills to meet the changing health needs of its population.

NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and specialty training programmes. NIMDTA supports trainees with the aim of maximising their potential to successfully progress, complete training and be appointed to permanent posts in NI. NIMDTA manages the quality of postgraduate medical and dental education in HSC Trusts and in general medical and dental practices through learning and development agreements, the receipt of reports, regular meetings, trainee surveys and inspection visits. It works in close partnership with local education providers to ensure that both the training and supervision of trainees support the delivery of high quality safe patient care. NIMDTA provides trainees with a wide range of opportunities to gain experience in leadership, quality improvement, research and teaching.

NIMDTA trains clinical and educational supervisors and recommends them to the General Medical Council (GMC) for recognition of their role. NIMDTA selects, appoints, trains and develops educational leaders for foundation, core and specialty medical and dental training programmes throughout NI.

NIMDTA is accountable to the GMC for ensuring that the standards set by the GMC for medical training, educational structures and processes are achieved. Revalidation is the process by which the GMC confirms that doctors are up to date and fit to practice. NIMDTA is the Designated Body for doctors in training and has a statutory role in making recommendations to the GMC to support the revalidation of trainees. NIMDTA works to the standards in the COPDEND framework for the Quality Development of postgraduate Dental training in the UK and the General Dental Council (GDC) standards for specialty education.

NIMDTA enhances the standard and safety of patient care through the organisation and delivery of career development for general medical and dental practitioners and dental care

professionals. It also supports the career development of general medical practitioners and the requirements for revalidation through the management and delivery of GP appraisal.

NIMDTA has been integrated as lead employer for Doctors and Dentists in training (DDiT) across the HSC. The aim of this service is to provide a high quality continuous employment experience for DDiT.

NIMDTA plays a key role in attracting DDiT to the HSC, and in creating an environment where they wish to continue to remain practising within the HSC.

NIMDTA carries out these roles on behalf of the DoH by focussing on the needs of people (population, trainees, trainers and NIMDTA staff), in partnership with key stakeholders and by upholding the HSC Values - openness and honesty, compassion, excellence and working together.



## Explanation of Quality Reports

The 'Health and Personal Social Services' (Quality, Improvement and Regulation) (Northern Ireland) Order 2003 introduced a Statutory **Duty of Quality** on the Health and Social Care Board and Trusts. This means that each HSC organisation, including NIMDTA, has a legal responsibility to ensure that the services that they provide meet the required standard.

**Quality Standards** for HSC in Northern Ireland were formally launched on 14 March 2006 and described five key quality themes:

- Corporate leadership and accountability of organisations
- Safe and effective care
- Accessible, flexible and responsive services
- Promoting, protecting and improving health and social wellbeing; and
- Effective communication and information.

The Quality 2020 Strategy, launched in 2011, was designed to protect and improve quality of health and social care in Northern Ireland. The purpose of **Quality 2020** was to create a strategic framework and plan of action that would maintain and improve quality and therefore patient safety over a ten year period.

The vision of **Quality 2020** was for HSC *“to be recognised internationally, but especially by the people of Northern Ireland, as a leader for excellence in health and social care.”*

Quality 2020 has the following five **Strategic Goals**:

- Transforming the Culture
- Strengthening the Workforce
- Measuring the Improvement
- Raising the Standards; and
- Integrating the Care.

Objective four of the Quality 2020 Strategy placed a requirement on each HSC organisation to produce a **Quality Report** each year. The aim of these Quality Reports is to increase the accountability of HSC organisations to deliver on the Duty of Quality that they are required by law to meet.

Quality Reports are required to clearly describe the progress made in each organisation toward meeting the five Strategic Goals of the strategy and also to report on the improvements made to the quality of services commissioned, delivered or promoted within the previous twelve months by that organisation.

NIMDTA recognises the vital role that postgraduate medical and dental education and training plays in ensuring patient safety and enhancing patient care. The **Annual Quality Report 2020-21** sets out what NIMDTA has done to support Quality 2020 under each of the five **Quality 2020 Strategic Goals**.

## Goal 1: Transforming the Culture

**Quality 2020 Aim:** *We will make achieving high quality the top priority at all levels in Health and Social Care. We will promote and encourage partnerships between staff, patients, clients and carers to support decision making.*

### NIMDTA Board

The NIMDTA Board is responsible for the strategic direction and control of NIMDTA's activities and comprises a non-executive Chair and five non-executive members (three lay members, one medical practitioner and one dental practitioner). The Board delegates specific areas of work to its three sub-committees (Audit, Governance and Risk, Remuneration) as well as to the Senior Management Committee (SMC).

The Audit Sub-Committee supports the Board by providing an independent and objective review of financial systems and information, the adequacy and effectiveness of the systems of internal control, as well as compliance with the law and appropriate guidance.

The Governance and Risk Sub-Committee supports the Board by providing oversight of NIMDTA's corporate governance framework. This Committee seeks to ensure that processes and governance structures are in place to effectively monitor risks and provide high quality training.



### NIMDTA Board 2020-21

*Back row (left to right): Mr Derek Maguire OBE, Mr Lee Wilson and Mr Garry Mc Kenna.  
Front row (left to right) Dr Janet Little OBE, Mr Alistair Joynes (Chair) and Mr Deane Morrice MBE.*

The Remuneration Sub-Committee supports the Board by considering issues in relation to the remuneration of Senior Managers.

The Board receives reports from members of SMC on the quality of training delivered by each of NIMDTA's five education departments (Dentistry, Foundation, Hospital Specialty, General Practice and Cross-departmental Education Management) as well as on the quality of performance of four further departments who work across the organisation (Business Management, Corporate Services, Trainee Employment and Professional Support).

Board members play a key role in transforming the culture through their commitment and their sustained interest in delivering high quality services in all aspects of our work which is evidenced by their attendance at staff briefings, joint workshops with senior members of staff, support of educational events (Annual Foundation Induction Day, Clinical Education Day, Research for Clinicians Day and Educational Excellence Day), meetings with distinguished visitors, participating on interview panels for senior staff appointments. Such participation is in addition to their work at Board and associated sub-committee meetings.

### **NIMDTA Senior Management Committee (SMC)**

SMC supports the Board through the provision of operational oversight of NIMDTA and the delivery of its services. The delivery of postgraduate education and training to Doctors and Dentists by NIMDTA is primarily carried out by five educational departments – Dentistry, General Practice, Foundation, Hospital Specialty and Education Management Team. These departments are supported by four further business departments that work across the organisation – Trainee Employment, Business Management, Corporate Services and Professional Support.

NIMDTA has established a number of internal cross-departmental groups that work to ensure that specific areas of NIMDTA's services are delivered consistently across departments, that learning is shared amongst key individuals and that peer support is available.

The Quality Agenda is embedded within the work streams of SMC and its sub-committees and is a responsibility of all Educator and Education Management staff.

NIMDTA's Quality Management Group (QMG) is a cross-departmental group which monitors and assesses the delivery of postgraduate medical and dental education and training against national standards. The GMC's Quality Assurance Framework outlines the responsibility of NIMDTA as a Deanery for the quality management of postgraduate medical training.

The aims of QMG are to ensure that standards required by regulatory bodies are met by promoting and sharing good practice across all specialties, enhancing the training of

Trainers, improving the quality of curriculum delivery in all specialties, removing obstacles to postgraduate medical education and training, and developing the resources and infrastructure of postgraduate medical education and training.

### NIMDTA Reports

NIMDTA reports to DoH through monthly, quarterly, mid-year and annual reports. These are reviewed at ground clearing and accountability meetings at mid and end of year. NIMDTA is accountable to the GMC for ensuring that the GMC standards for postgraduate medical training (Promoting Excellence) are achieved in NI via the GMC Quality Reporting System (QRS). NIMDTA is also required to respond to GMC queries, results of GMC National Training Surveys (NTS) and other educational metrics (examination success, annual reviews of progress of Trainees, success at recruitment into specialty training).

### Good Practice

Good practice, areas for improvement and areas of concern are identified through reports from Local Educational Providers (LEPs), specialty training programmes, visits to educational units, Trainee surveys as well as the Placement Quality Initiative. NIMDTA has a variety of opportunities to share good practice:

Regionally	
<b>Department of Health</b> Central Medical Advisory Committee Day Case Elective Care Centre Group Emergency Care Regional Collaborative Employer Liaison Group Library Advisory Group Medical Leaders' Forum (clinical service-medical education interactions) Privacy Advisory Committee Regional Review Urgent and Emergency Care Responsible Officer Forum Single Employer Steering Group Single Employer Working Group Workforce Strategy Reference Group	<b>General Medical Council</b> Welcome to UK Practice Regional Group
	<b>Health and Social Care</b> Collective Leadership Strategy Reference Group Informal Medical Directors' Group Informal Small ALB Chief Executives' Group Quality Improvement Forum
	<b>Health and Social Care Board</b> Regional Plastic Surgery and Burns Programme Board
	<b>Northern Ireland Health and Social Care Postgraduate Education Forum</b>
	<b>NIMDTA</b> Lead Educator Forum
<b>Public Health Agency (PHA)</b> Medical Directors Group (clinical service-medical education interactions)	
<b>Quality 2020 Developing Professional Leadership Group</b>	

## Nationally



### 4 Nation Statutory Education Body

Chief Executives Group  
Medical Directors Group

### Committee of GP Education Directors (COGPED)

GP Committee Liaison Group  
RCGP Partnership Group

### Academy of Medical Royal Colleges

Joint Academy  
Training Forum

### Royal College of GPs (RCGP)

Assessment Committee  
Curriculum Development Group

### Committee of Postgraduate Dental Deans and Directors (COPDEND)

### National Multi-Specialty Conference (NACT)

### Dental

Business Managers Meeting  
Dental Core Training Advisory Group  
Foundation Training Advisory Group  
Specialty Training Advisory Group

### GDC DFT Undergraduate Liaison Group

### Royal College of Physicians London Postgraduate Deans Liaison Group

### Medical and Dental Recruitment and Selection (MDRS)

Careers Group  
Programme Board  
Recruitment Group

### Health Foundation Q Cohort

### Scottish Medical Education Conference

### UK Groups

Foundation Curriculum Group  
Foundation Programme Board  
Foundation Programme Executive Committee  
Medical Education Database Development Group  
Medical Education Reference Group

### Irish Clinical Academic Training Programme Steering Group

### Health Education England

Foundation 4 Nations Policy Group  
Medical Foundation Programme Review

### Conference of Postgraduate Medical Deans (COPMeD)

4 Nation Revalidation Overarching Group  
4 Nation Business Manager's Meeting  
Academic Training Forum  
Overarching Data Group  
Professional Support Group  
PYA Review Group  
Specialty Advisory Committee Review Group  
Senior Managers Forum  
Senior Managers Revalidation Best Practice and Development Forum

### General Medical Council (GMC)

Curriculum Oversight Group  
Education Advisory Forum  
Equality & Diversity Advisory Group  
MLA Programme Board  
NTS Group  
Quality Leads Group  
Responsible Office Reference Group  
Revalidation Oversight Group  
Review of Wellbeing  
UK Advisory Forum

The success and good practice of NIMDTA Educators and Trainees is acknowledged on the website as well as in Educator and Trainee Newsletters.

There are Trainee newsletters for Foundation, GP, Core Medicine, Paediatric and Hospital Specialty Trainees. The Foundation Newsletter has been issued bi-weekly since August 2014. NIMDTA issues Lead Educator and Recognised Trainer Newsletters to welcome new Educators and Recognised Trainers, announce forthcoming training events for Educators and Trainers, celebrate good practice and achievements and to highlight changes in guidance and policies.

## Foundation Update

Issue 296# - 18th March 2021

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Nurses & Dental Training Agency  
  
Northern Ireland  
Foundation School

Click on the blocks below to be linked to their subject.

Click here to see the latest UKFPO Bulletin

Items Included in this issue:

- UKFPO/NACT Foundation Programme Sharing Best Practice Event - 24 March 2021
- UKFPO Call for Foundation Doctor Case Studies
- The Learning Hub - resources to support the management of the tracheostomy in COVID-19 patients
- G7 Youth Summit: Recommendations Survey

### Reminder to all Foundation Doctor's Absences

Trainees are required to advise the NIFS as well as the Single Lead Employer team of any sick/isolation/covid/compassionate leave. Further information and a copy of the form to be completed for the NIFS can be found [here](#).

### Eportfolio Updating

Ahead of the upcoming ARCP's in June this is just a reminder to all trainees to ensure that your TURAS portfolio is kept up to date with all requirements. Should you be required to self-isolate please ensure that you also keep your portfolio updated with all e-learning done during this time.

### ARCP Reminder

You can view the updated guidance and ARCP checklists by clicking here. For any specific ARCP guidance please contact [foundation.nimdtahscni.net](mailto:foundation.nimdtahscni.net)

### Courses

Health Education England East of England, in conjunction with MDRS Careers Group, COPMeD, COPDenD, NIMDTA, HEIW and NHS Education for Scotland, are delighted to announce booking is now open for this year's Virtual Careers Conference being held on Thursday 24th June 2021.  
[Click here for more information](#)

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TMS International Junior Doctors' Conference for Aspiring Surgeons will be taking place on Saturday 26th June 2021.  
[Click here for more information](#)

### ARCP Webinar for all FPD's / ES's & Foundation Doctors

HEE is holding an update webinar for doctors in training on 25th March 7pm, focusing in particular on Foundation ARCP guidance and processes.

Do you have a question? Submit it here  
[->http://orlo.uk/ZpkWL](http://orlo.uk/ZpkWL)

Link to join webinar on the night  
[->http://orlo.uk/ErfoQ](http://orlo.uk/ErfoQ)

### F2 Generic Skills Modules

If you are struggling to get a place on one of the final dates of a module could you please email [genericskills.nimdtahscni.net](mailto:genericskills.nimdtahscni.net).

If you are on a waiting list for a certain module and would like to confirm a place (if there are spaces available), you do not have the option to do this yourself, please send an email to: [genericskills.nimdtahscni.net](mailto:genericskills.nimdtahscni.net).

**Please do not double book** - please review your bookings to make sure you do not have any modules double booked. If you do please email [genericskills.nimdtahscni.net](mailto:genericskills.nimdtahscni.net) to cancel dates.

Date & Time	Module	Module	Venue	Spaces Remaining
25 March 2021 09:00	Module 7	Ethics/breaking Bad News	Zoom	0
26 March 2021 09:15	Module 9	Safeguarding	Zoom	0
31 March 2021 13:30	Module 6	Mental Capacity	Zoom	0
9 April 2021 09:15	Module 3	Quality Improvement (last session)	Zoom	16
14 April 2021 13:30	Module 6	Mental Capacity	Zoom	3
21 April 2021 13:30	Module 6	Mental Capacity	Zoom	17
22 April 2021 09:00	Module 7	Ethics/breaking Bad News	Zoom	8
23 April 2021 09:00	Module 9	Safeguarding	Zoom	0
28 April 2021 13:30	Module 6	Mental Capacity	Zoom	31
7 May 2021 09:00	Module 9	Safeguarding (last session)	Zoom	24

Please do not double book modules!!

I want to

Book a Module

Cancel a Booking

See All Dates

## Staff Engagement

Engagement with staff is always a high priority for NIMDTA and was even more important during this period when NIMDTA staff moved to remote working due to the pandemic. Staff briefings were facilitated virtually via Zoom, with staff induction also moving online. There were senior staff changes during this period with the Chief Executive/Postgraduate Dean retiring and a new Senior Management structure being put in place with the appointment of two new posts of Chief Executive and Medical Director. It was important to keep staff updated with these changes.



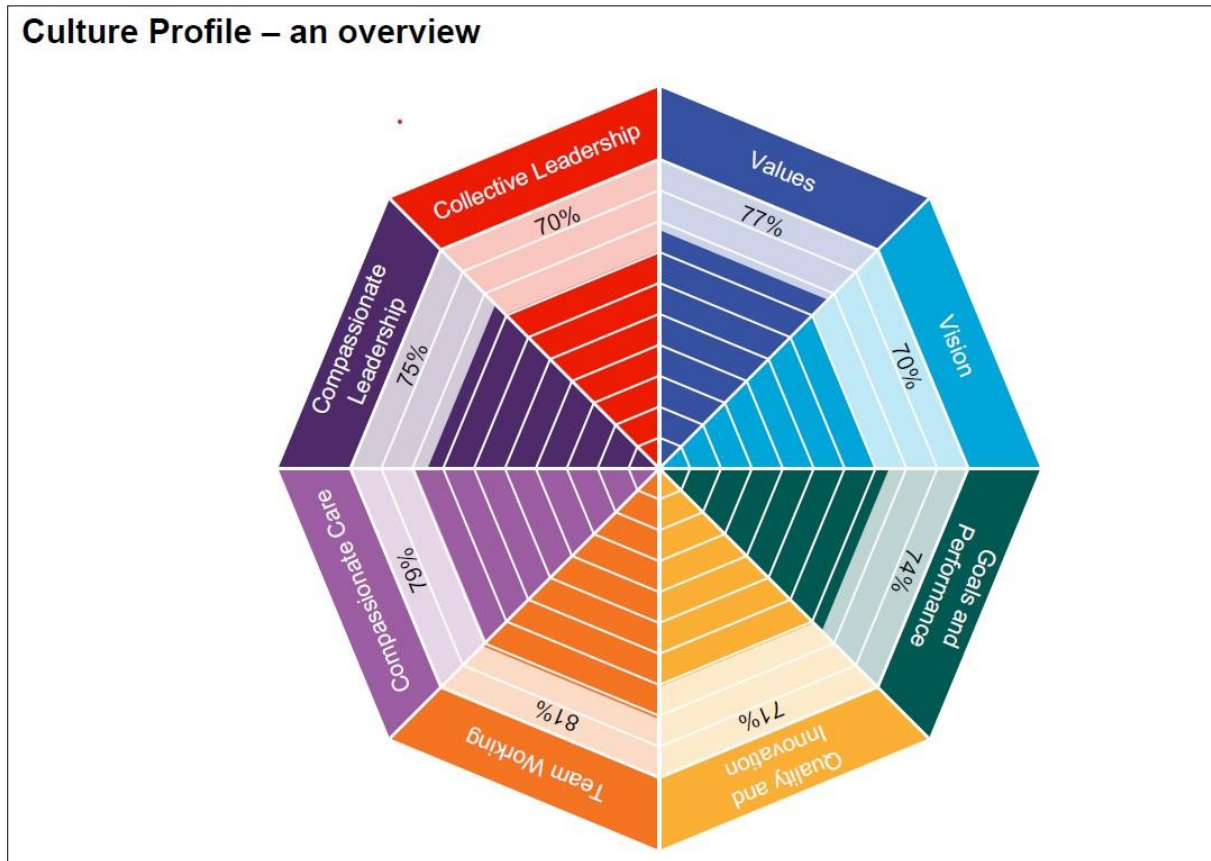
The graphic features the NIMDTA logo in the top right corner, which includes the text 'Northern Ireland' above 'mdta' and 'Medical & Dental Training Agency' below it. The central image shows a group of healthcare professionals in blue scrubs, with a close-up of a dental procedure on the right. Overlaid text reads 'NIMDTA Induction', 'Roisin Campbell', 'Senior Manager', and 'Professional Support'. At the bottom, the tagline 'Enhancing Patient Care Through Training' is displayed.

## Cultural Survey

NIMDTA staff participated in the HSC Cultural Assessment survey in September 2020. The survey reviewed the following domains: Collective Leadership, Values, Vision, Quality and Innovation, Goals and Performance, Team Working, Compassionate Care and Compassionate Leadership.



NIMDTA scored particularly high in the domains of Team Working (81%) and Compassionate Care (79%) and 70% and over in all of the other domains as shown below:

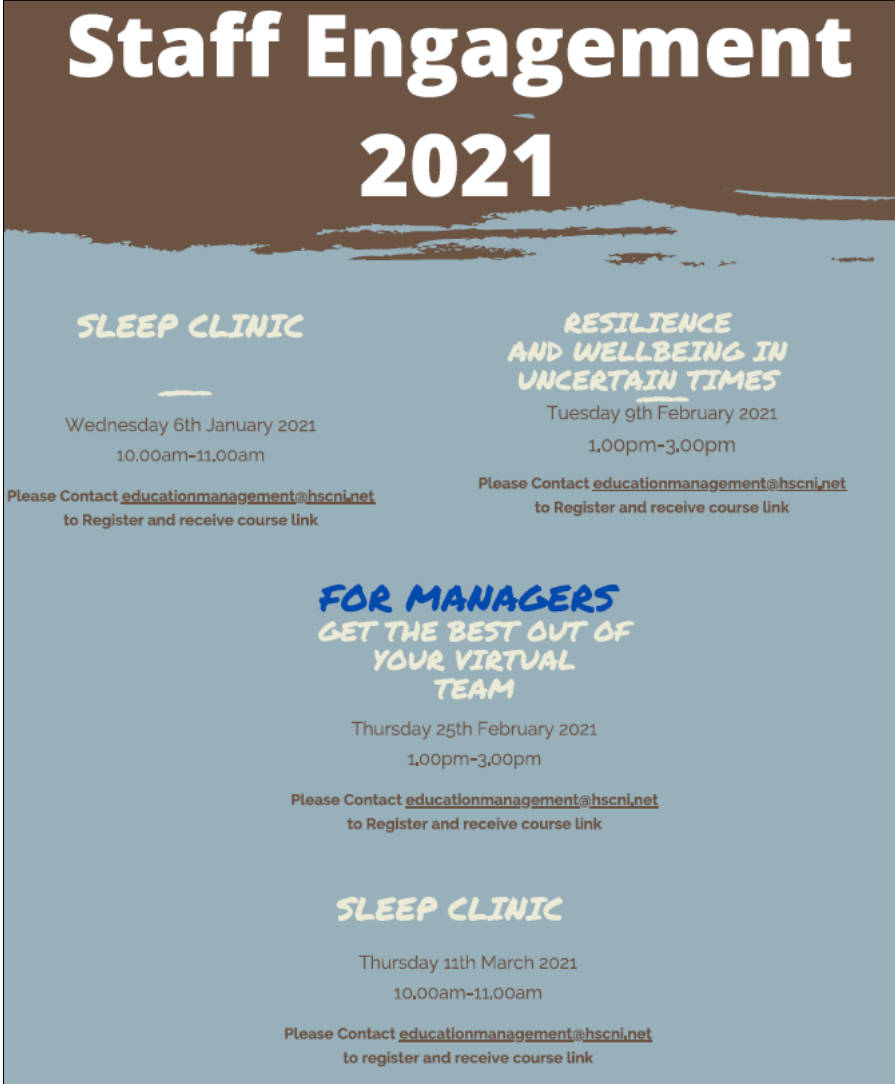


### Staff Well Being

Following government guidelines NIMDTA staff continue to work from home. This has had an effect on wellbeing for some staff who miss the daily interaction in the workplace. Team Managers have invested a huge effort in communicating with their teams and ensuring that they are supported. NIMDTA supported managers by providing programmes to assist them in getting the best out of their virtual team. Well-being programmes for all staff were also provided online via Zoom with topics including:

- Sleep Clinic
- Resilience and Well-being in Uncertain Times
- Managing Anxiety and Fear through Uncertainty.

NIMDTA will also reintroduce a Health and Well-being hours that staff can choose to use within their working week from April 2021.



**Staff Engagement  
2021**

**SLEEP CLINIC**  
Wednesday 6th January 2021  
10.00am-11.00am  
Please Contact [educationmanagement@hscni.net](mailto:educationmanagement@hscni.net)  
to Register and receive course link

**RESILIENCE  
AND WELLBEING IN  
UNCERTAIN TIMES**  
Tuesday 9th February 2021  
1.00pm-3.00pm  
Please Contact [educationmanagement@hscni.net](mailto:educationmanagement@hscni.net)  
to Register and receive course link

**FOR MANAGERS  
GET THE BEST OUT OF  
YOUR VIRTUAL  
TEAM**  
Thursday 25th February 2021  
1.00pm-3.00pm  
Please Contact [educationmanagement@hscni.net](mailto:educationmanagement@hscni.net)  
to Register and receive course link

**SLEEP CLINIC**  
Thursday 11th March 2021  
10.00am-11.00am  
Please Contact [educationmanagement@hscni.net](mailto:educationmanagement@hscni.net)  
to register and receive course link

### Engagement with DoH and External Bodies

In addition to the formal DoH groups that NIMDTA is involved in, there are quarterly sponsorship meetings with the Workforce Policy Directorate and the Postgraduate Medical Dean has quarterly meetings with the Chief Medical Officer (CMO).

Placement Quality Reviews were promoted and recognised nationally through poster presentations at the NACT Foundation Meeting in March 2021. The submitted poster was awarded 1<sup>st</sup> prize as an example of good quality improvement practice.

## COVID-19

The pandemic has had a significant impact on every area of NIMDTA's activities.

Many educational activities were stood down or postponed until July 2020 (professional examinations; formal education; mandatory courses; study leave; planned rotations; recruitment; annual Trainee reviews; quality management visits and surveys) and postgraduate Educators stepped down from educational roles to support the clinical response to the pandemic.

Academic and Out of Programme Trainees stepped back into full time clinical work in HSC Trusts for a period before returning to their programmes.

Over 200 final year Medical Students graduated early, were registered early with the GMC and NIMDTA organised their early entry into the HSC workforce as FY1s.

NIMDTA transitioned its staff successfully to working from home and conducting all its meetings using teleconferencing and videoconferencing.

In response to the severity, rapidity and wide-ranging nature and scale of these changes to NIMDTA's activities, the NIMDTA Board commenced more frequent briefings online from mid-March 2020.

### Impact on Medical and Dental Training Programmes of COVID-19 Response

Following agreement at the Chief Executives Forum, the Trainee Redeployment Group was established to enable NIMDTA and LEPs to work in partnership to develop the principles and approach to redeployment of Trainees to support the wider healthcare system during pandemic surges. The first meeting took place in March 2020 with nominated representatives from each Trust in attendance and meetings have continued to take place weekly / fortnightly throughout the pandemic with a detailed action log maintained.

Following the first surge of the COVID-19 pandemic, the group was repurposed to the Enabling Postgraduate Training Group as the focus shifted to sharing good practice in planning, developing and delivering teaching and training at local and regional level for Trainees and Trainers.

The Quality Manager supported the Postgraduate Medical Dean in communicating with Trusts to ensure all requests for Trainee redeployment were discussed and agreed with the Postgraduate Dean in advance of any change. During the initial phase of the pandemic, there were a large number of Trainees identified for redeployment (circa 300) from their

usual post to the areas where there was expected to be greatest clinical need (e.g. Emergency Departments; Intensive Care Units; Acute Medical Units). The redeployments during this period were gradually reversed as the number of cases of COVID-19 decreased at the start of summer 2020.

Following review of this first surge, principles for redeployment were agreed with HSC Trusts in September 2020 prior to the increase in COVID-19 cases that occurred through to March 2021. Trainees were consulted prior to moving; previous ARCP outcomes were considered; the duration of placements were shortened (usually 2 to 4 weeks); a return date was defined with Lead Educator and Postgraduate Medical Dean approval; induction and supervision arrangements were made clear. Trainees in Academic posts and General Practice were not moved during this period. In the second phase 160 Trainees were identified for redeployment.

In the context of high levels of COVID-19 activity in Trusts during January 2021 and as a result of prior advanced planning, it was possible for Trainees who were due to rotate between training posts on 3rd February 2021 to still do so.

The NIMDTA website was updated with a specific COVID-19 section which was organised into themes for ease of reference for Trainees due to the volume and range of information provided by DoH, GMC, PHA, statutory education bodies and Royal Colleges. Trainee Guidance was developed and issued in relation to supporting the pandemic response and the impact on areas such as recruitment, ARCP, training progression, redeployment and health and wellbeing.

Regular meetings took place with the COPMeD Senior Managers in England, Scotland and Wales which provided a forum for sharing of information and ensuring a consistent approach to training issues across the Four Nations.

To assist with transfer of information between NIMDTA and Trusts for all rotations between August 2020 and April 2021, information was collated for Trainees who were categorised as Clinically Extremely Vulnerable and the personal impact to them at this time. Information was shared with the next receiving Trust to facilitate Trainee and service adjustments.

A Regional HR Cell Group was established with daily meetings taking place with representation from Trusts, the HSC Business Services Organisation (BSO), PHA, Northern Ireland Ambulance Service (NIAS) and Northern Ireland Fire and Rescue Service (NIFRS). Information shared at this Group was incorporated into Trainee guidance.

To support the introduction of the FiY1 initiative in NI, NIMDTA established the FiY1 Progress Group with representation from QUB to consider the allocation process, induction

and support of Trainees appointed to this programme. A NIMDTA/Trust Human Resources working group was also developed to support and facilitate the implementation of this initiative at an operational level.

A Regional Induction Programme was designed and delivered as a series of online presentations facilitated by Project Echo in advance of all FiY1s commencing. Local induction programmes were also developed in conjunction with Trust Foundation Programme Directors.

In May 2020, 213 FiY1 Doctors were allocated regionally across the five HSC Trusts. This group of new Trainees commenced work in late May 2020 and continued to support the response to the pandemic until July 2021.

Online support sessions were held for FiY1s in each Trust during May and June 2020 via Zoom with representatives from NIMDTA and Trusts. A summary of these sessions was collated and shared with all FiY1s and Trusts and published on NIMDTA's website. A feedback survey was conducted with FiY1s and those involved in providing online regional induction to gain further insight into the benefits and limitations of online delivery for future Foundation regional induction programmes.

During the first phase of the pandemic, all teaching and training events for Trainees and Trainers were cancelled or postponed to focus on essential upskilling of staff for front line care. In June 2020, an internal Facilitating Online Learning and Development Task and Finish Group was established to consider how postgraduate medical and dental education should be planned, developed and delivered regionally for Trainees and Trainers using digital technology to support online learning and development. The aims of the group included development of training and support for Clinical Facilitators, Educators and Education Management staff to facilitate and deliver education and training, and to identify the IT and other resources required to support this. An internal Business Case was submitted and approved by SMC for a Moodle based Learning Management System (LMS) to meet NIMDTA's requirements until the regional system is in place.

NIMDTA is represented on a Project Board to implement a Regional Learning Management System for the HSC, to consider the functions and requirements from the perspectives of Doctors and Dentists in training. These include a learning and development repository to support Trainees in completing induction and other training modules; maintaining records for reporting and to be easily accessible to Trainees, NIMDTA and Trusts or Hosts.

A Maximising and Improving Training Opportunities workshop took place in September 2020 with representatives from NIMDTA and Trusts. The importance of collaborative partnership working to rebuild medical education and training in parallel with the Rebuilding HSC

Services initiative was highlighted. Two breakout sessions were hosted: “Maintaining Medical Education and Training During a Pandemic” (including how redeployment of Trainees could be staged and proportionate, and how formal education and practical experience for Trainees could be protected during a pandemic) and the “Strategy to Enhance the Quality of Medical Education in Northern Ireland” was the focus of a second breakout session, considering improving Trainee engagement to enhance Trainee satisfaction.

Throughout the pandemic, NIMDTA has remained committed to the aims of Goal 1: Transforming the Culture:

1. “make achieving quality the top priority at all levels in Health and Social Care”
2. “promote and encourage partnerships between staff.”

**Depending on the course and impact of the COVID-19 pandemic, NIMDTA plans for next year are:**

1. Continue to engage with **Senior Educators and Education Management staff** members based at NIMDTA during 2021-22 through staff update newsletters, staff engagement events, staff workshops, health and wellbeing events, and staff training sessions.
2. Promote engagement with **Lead Educators** in 2021-22 through the Lead Educators’ Forum, flagship educational events (Annual Clinical Education Day; Annual Professional Support Day; Annual Educational Excellence Day; NI Simulation and Human Factors Network Conference - NISHFN), induction events and skills workshops.
3. Engage with **Recognised Trainers** to enhance training, opportunities and outcomes through the Recognised Trainer Forum, Trainer newsletters, educational events and newsletters.
4. Promote engagement with **Trainees** during 2021-22 through welcome evenings, Trainee newsletters, website, social media, Trainee Representatives, the Trainee Forum, Trainee Ambassadors and flagship Trainee events (Annual Educational Excellence Day; Annual Research for Clinicians Day; Next Steps – Career Events; NI Simulation and Human Factors Network Conference).

5. Maintain engagement with **former Trainees and Educators** during 2021-22 through Alumnus Network newsletter published twice yearly.
6. **Work collaboratively** with other health care education bodies in NI during 2021-22 through the continued involvement in the NI HSC Postgraduate Education Forum.
7. Collaboratively work and **engage with national educational committees** including COPMeD, COPDEND, COGPED, Senior Managers Forum, AoMRC Education Committee and their sub-groups.
8. Work with GMC and HSC Trusts to facilitate attendance at the **GMC Welcome to UK Practice** workshop for new Doctors to training in Northern Ireland from August 2021.
9. Work with DoH, HSCB, PHA and HSC Trusts to ensure that **restart of postgraduate medical and dental education** post-pandemic is fully integrated into HSC plans to rebuild clinical services.
10. Work collaboratively with **key stakeholders** on a four nation basis.
11. Induct and empower four new members of the **NIMDTA Board** who are scheduled to join us in 2021-22.
12. Develop a new strategic plan that further embeds our **quality improvement** work.

## Goal 2: Strengthening the Workforce

**Quality 2020 Aim:** *We will provide the right education, training and support to deliver high quality service. We will develop leadership skills at all levels and empower staff to take decisions and make changes.*

In addition to NIMDTA's roles in the recruiting and allocating of Trainees, overseeing and managing the training delivered to Doctors and Dentists in Training in educational units, assessing Trainee progress, revalidating Trainees and recognising Clinical and Educational Supervisors in educational units, NIMDTA has responsibilities for providing formal education to Trainees and for training and developing its own staff. NIMDTA's activities in the training and development of these different groups are described below.

### Development of NIMDTA Board

In line with our pandemic response, the NIMDTA Board met frequently in order to enhance support at this time. Four new members are due to join in 2021-22. In March 2021, existing members participated in an online survey and workshop in order to shape the induction priorities of future members.

In addition, Board members attend two staff engagement events each year allowing staff to network, engage and ask questions. NIMDTA Board members are very supportive of and attend many NIMDTA educational events as well as attending other educational workshops.

### Senior Management Committee

In addition to invitations to attend the Board workshops, the NIMDTA SMC had strategic planning away days together on 22 June 2020, 5 October 2020 and 22 February 2021.

### Development of NIMDTA Educators

The primary role of NIMDTA is to ensure that postgraduate medical and dental Trainees receive high quality education and training and are therefore able to deliver high quality care to their patients. To ensure that this happens, NIMDTA needs to equip, develop and inspire Recognised Trainers, Programme Leaders and Senior Educators.

NIMDTA's Faculty Development Group (FDG) organises, delivers and reviews training events for Lay Representatives, Recognised Trainers, Lead Educators and Senior Educators. There are a wide range of events delivered each year targeted at the training needs of NIMDTA's Educators.



The flagship event each year is the Clinical Education Day which was held for the first time online on 11 September 2020 in conjunction with Queen's University of Belfast.

The Clinical Education Day received positive evaluation and had keynote addresses delivered by:

- Mr Robin Swann (DoH)
- Professor Colin Melville (GMC)
- Professor Karen Morrison (QUB)
- Dr Gerry Gormley (QUB)
- Professor Wendy Turner (QUB).

It also featured several workshops on topics such as:

- Implementing the new Undergraduate Curriculum
- Simulation through and beyond COVID-19
- Foundation Placement Quality
- Zooming forward in GP Silos.

 <b>QUEEN'S UNIVERSITY BELFAST</b>		<b>Clinical Education Day</b> Friday 11 September 2020		 Northern Ireland <b>mdta</b> Medical & Dental Training Agency
<b>Reconnected Learning</b>				
09:45 – 10:00	Arrival to Zoom Meeting			
10:00 – 10:10	Welcome	Professor Keith Gardiner Postgraduate Medical Dean, NIMDTA		
10:10 – 10:15	<b>KEY NOTE ADDRESS 1</b> <i>Rebuilding the HSC post COVID-19</i>	Mr Robin Swann Minister for Health, Department of Health		
10:15 – 10:30	<b>KEY NOTE ADDRESS 2</b> <i>GMC Update</i>	Professor Colin Melville Medical Director and Director of Education and Standards, GMC		
10:30 – 10:40	Questions & Answers			
10:40 – 10:55	<b>KEY NOTE ADDRESS 3</b> <i>Mind the Gap: Thoughts on Medical Education in the 2020s</i>	Professor Karen Morrison Dean of Education, School of Medicine, Dentistry and Biomedical Sciences, QUB		
10:55 – 11:05	Questions & Answers			
11:05 – 11:20	Break			
11:20 – 11:40	Breakout Sessions			
Breakout Session 1:	<b>Undergraduate Medical Education</b> <i>Implementing C-25 and Update</i>	Professor Neil Kennedy Centre Director, School of Medicine, Dentistry and Biomedical Sciences, QUB		
Breakout Session 2:	<b>Specialty Training</b> <i>Simulation through and beyond COVID-19</i>	Professor Gerry Gormley Professor of Simulation and Clinical Skills, QUB  Dr Ian Steele Associate Postgraduate Dean & Director of Postgraduate Hospital, NIMDTA		
Breakout Session 3:	<b>Foundation Training</b> <i>Foundation Placement Quality: What Has Changed?</i>	Dr Lorraine Parks Director NI Foundation School, NIMDTA  Dr Sally Anne Phillips Associate Dean, Placement Quality, NIMDTA		
Breakout Session 4:	<b>General Practice Education</b> <i>Zooming forward in GP...and through the silos</i>	Dr Michele Stone Director Postgraduate, General Practice Education, NIMDTA  Dr Siobhan McEntee Associate Director, GP Specialty Training, NIMDTA		
11:40 – 11:55	<b>KEY NOTE ADDRESS 4</b> <i>InterSim: Update on the new simulation centre at QUB</i>	Professor Gerry Gormley Professor of Simulation and Clinical Skills, QUB		
11:55 – 12:10	<b>KEY NOTE ADDRESS 5</b> <i>Generation Y? Challenges and Opportunities in Medical and Dental Education</i>	Professor Wendy Turner Clinical Professor, Restorative Dentistry, QUB		
12:10 – 12:25	Questions & Answers			

Induction workshops for new Educator and Education Management staff were held throughout the year and a variety of Faculty Development workshops for Educators were also held. Topics were as follows:

- Induction (18 September 2020 and 10 October 2020)
- Online Clinical Facilitation Skills (16 September, 12 November 2020 and 26 March 2021)
- Advanced Online Clinical Facilitation Skills (31 March 2021)

A Lay Representative Training Day was also held on 2 November 2020.

The quality of training events is monitored by feedback from the participants at each event which is reviewed at Faculty Development Group meetings.

During 2020-21, NIMDTA supported 16 Educators and Trainers working towards university level qualifications in Clinical Education (four Dental; eight GP; and four Medical Foundation / Hospital Specialty).



## Development of NIMDTA Staff

NIMDTA continues to support the development of its staff. Two Senior Managers attended the HSC Acumen Leadership programme and one Senior Manager the HSC Proteus programme. A further Senior Manager attended the HSC Senior Coaching programme. Educators who work to support NIMDTA in managing training programmes were also supported to undertake medical education courses at QUB.

In house development courses were provided virtually via Zoom.

During 2020-21, NIMDTA organised and delivered the following Staff Development Events:

- Appraiser Training (23 October 2020)
- Appraisee Training (30 October 2020)
- Excel Training (20 November 2020)
- Interview Skills (26 November 2020)

The graphic is a 'Staff Development Calendar 2020' for Northern Ireland. It features a dark blue background with a red banner at the top left containing the title. The logo for NIMDTA (Northern Ireland Medical & Dental Training Agency) is in the top right. A yellow banner in the center reads 'DATES FOR YOUR DIARY'. Below this are three calendar-style cards. The first card, 'Appraisee Training', lists the date as Friday, 30 October, from 2:00 to 4:00pm, via Online Learning, with a 'Register Here' link. The second card, 'Interview Skills', lists the date as Thursday, 26 November, from 10:00 to 12:00pm, via Online Learning, also with a 'Register Here' link. The third card, 'MORE COURSES COMING SOON', is partially obscured by text providing contact information: 'For Further Information regarding Staff Development courses, please contact: Education.Management@hscni.net'. A 'Please Note' section states that registrants will receive a confirmation email with joining information.

## Development of NIMDTA Trainees

### Provision of Foundation Generic Skills for F2 Doctors

Sessions include training in the following:
<b>Module 1:</b> Acute Kidney Injury
<b>Module 2:</b> Career Guidance
<b>Module 3:</b> Quality Improvement
<b>Module 4:</b> Patient Safety & Legal Aspects of Practice
<b>Module 5:</b> Teamwork / Communication Skills
<b>Module 6:</b> Mental Capacity
<b>Module 7:</b> Ethics / Breaking Bad News
<b>Module 8:</b> Professionalism & GMC Guidance
<b>Module 9:</b> Safeguarding: Vulnerable Adults & Children
<b>Module 10:</b> NIAS / Pre-hospital Care

In 2020-21, the fourteenth annual programme of Foundation Generic Skills training days was delivered regionally for all Medical Foundation Year 2 (F2) Doctors. A total of eight days of study leave are set aside for attendance at these training days.

Attendance at all these sessions is mandatory and is closely monitored by the Foundation Team.

All sessions are interactive and designed to meet the professional needs of Doctors early in their career, and the requirements of the UK Foundation curriculum. Feedback from online evaluations is reviewed to enhance subsequent sessions to meet changing professional needs.

The COVID-19 pandemic resulted in the need to deliver all modules remotely via Zoom during 2020-21. The Foundation Team worked with Clinical Facilitators to redesign the delivery of modules to address changes as a result of the new UK Foundation Curriculum.

In order to facilitate attendance of all F2 Doctors, each module was delivered seven times during the academic year. From September 2020 until May 2021, a total of 63 training days were organised, all were delivered successfully. Unfortunately due to the practical, hands on nature of Module 10: NIAS / Pre-hospital Care we were unable to deliver these sessions during this academic year.

Despite the challenges associated with COVID-19, attendance was close to 100% for the entire programme, and all F2 Doctors were able to provide evidence of sufficient curricular teaching for the purposes of ARCP.

### General Practice (GP) Training

The number of available places to commence GP training each year was increased from 97 per year to 111 per year in August 2018. These have all been filled in the year 2020-21 with 354 GP Trainees in total.

GP training runs over three years; 18 months in hospital posts and 18 months in general practice. The GP department ensure delivery of the Royal College of General Practitioners (RCGP) curriculum throughout the three years, developing quality improvement (QI) and

leadership skills, while also providing Trainee support. When in hospital posts, GP Trainees attend monthly small group sessions based in GP practices. While in ST2 GP posts, this is continued on a weekly basis.

In ST3 year, the Day Release course in each locality is led by the Programme Directors. This continues to focus on the RCGP curriculum, as well as examinations and preparation for the workplace.

QI has been an integral part of ST3, initially through Project Echo. Changes in the RCGP curriculum now require QI activity to be undertaken every year with a project in ST2 year. The GP department have trained several QI mentors to help support Trainees with their QI activity. Previous projects are available to view on <https://www.youtube.com/watch?v=HKd82h2AjMg>

Development of leadership skills is also an integral part of the RCGP curriculum. In addition, the GP department has developed opportunities for Trainees to learn enhanced skills such as implant and intrauterine contraceptive device insertion, minor surgery and vasectomy whilst in GP training.

During 2020-21, the GP department delivered 372 courses and training events for GP Trainees. This number was reduced from 485 due to COVID-19 restrictions April 2020 – July 2021.

## Hospital Specialty Training

Within the medical and dental hospital specialties, delivery of the curriculum for Trainees is a joint responsibility of NIMDTA and LEPs. Each Specialty Unit is expected to have weekly teaching sessions.

NIMDTA re-designed its training in generic professional and leadership skills for Specialty Trainees in response to the Shape of Training report and the new GMC Generic Professional Capabilities Framework. Shape of Training highlighted that medical education and training extends well beyond learning the technical aspects of medicine and should also focus to a major extent on the development of a Doctor's professional values, attitudes and behaviours.

The GMC has described these qualities as Generic Professional Capabilities and considered them under nine domains:

1. Professional values and behaviours
2. Professional skills
3. Professional knowledge
4. Capabilities in health promotion and illness prevention
5. Capabilities in leadership and team working
6. Capabilities in patient safety and QI
7. Capabilities in safeguarding vulnerable groups
8. Capabilities in education and training
9. Capabilities in research and scholarship

**iQUEST**  
IMPROVING QUALITY AND UNDERSTANDING  
TO ENHANCE SPECIALTY TRAINING

**iQuest is a modular, generic professional skills framework for all specialty trainees.**

There are 15 modules divided into three sets of 5 modules – with one set each being targeted at initial, intermediate and final years of specialty training. This initiative aims to equip trainees with the ability to communicate effectively, empathise, lead, follow and improve patient care, safety and experience.

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**How to book places on iQUEST**  
iQuest modules can be booked on the NIMDTA website. Ensure that your details are up to date and correct. If you have any queries, please email [iquest@nimdtanet.net](mailto:iquest@nimdtanet.net) or refer to [www.nimdtanet.net](http://www.nimdtanet.net).

**1. Being a Professional**  
Full day workshop (GMC Facilitator)  
Aims of Workshop:  
- To highlight and discuss a number of GMC ethical guidance  
- Use of Social Media  
- Raising and acting on concerns about patient safety  
- To consider Fitness to Practise

**2. Conflict Resolution in Health**  
Half-day workshop (NIMDTA Clinician)  
Aims of Workshop:  
- Identify the signs and types of conflict  
- Recognise your conflict management style  
- Evaluate different models of conflict resolution in a healthcare context  
- Explore the role of personality awareness in conflict resolution  
- Consider a range of strategies  
- Apply learning to address issues in case studies

**iQUEST**  
IMPROVING QUALITY AND UNDERSTANDING  
TO ENHANCE SPECIALTY TRAINING

The Shape of Training report goes well beyond learning the technical focus to a major extent on the values, attitudes and behaviours that doctors should develop. This report indicated that the GMC lead, follow and be diligent as doctors should develop. The General Medical Council Professional Capabilities and domains:

1. Professional values and behaviours
2. Professional skills
3. Professional knowledge
4. Capabilities in health promotion and illness prevention
5. Capabilities in leadership and team working
6. Capabilities in patient safety and QI
7. Capabilities in safeguarding vulnerable groups
8. Capabilities in education and training
9. Capabilities in research and scholarship

NIMDTA has therefore designed this framework for all specialty trainees, which are the Generic Professional Capabilities. This programme

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Recommendation six of the Shape of Training report is that appropriate organisations must introduce a generic professional capabilities framework for postgraduate training based on Good Medical Practice that covers communication, leadership, QI and safety.

In 2014, NIMDTA designed a modular, generic professional skills framework for all medical and Dental Specialty Trainees. This consisted of 15 modules divided into three sets of five – with one set each being targeted at initial (CT1-2 / ST1-2), intermediate (ST3-5) and final (ST6-8) years of specialty training. The programme is called iQUEST (improving Quality and Understanding to Enhance Specialty Training). iQUEST seeks to address the components of the GMC’s Generic Professional Capabilities Framework, building on the Generic Skills Programme delivered by the NI Foundation School and preparing Trainees for the next steps in their career.

Following a review of the iQUEST programme, NIMDTA introduced a number of new modules, bringing the total number of available modules to 17. These new modules covered areas such as “Conflict Resolution in Healthcare”, and “Mentoring for Success”. Modules are no longer restricted to Trainees from specific training years.

All formal education sessions and examination preparation courses in specialty programmes restarted during 2020-21 and all continued to take place virtually. Formal education provision continues to be reviewed and updated annually in response to changing training requirements.

New processes agreed by the Four Statutory Education Bodies were put in place for ARCPs from May 2020 to facilitate delivery of this important function during the pandemic. These arrangements were continued for all ARCPs in 2020-21.

For Hospital Specialty Training, 682 Trainees achieved an Outcome 1 (Satisfactory progress), 190 Trainees successfully completed their programme and received an Outcome 6, 32 Trainees received an Outcome 2 (Inadequate progress by the Trainee – no additional training time required), 37 received an Outcome 3 (Inadequate progress by the Trainee – additional training time required), three Trainees received an Outcome 4 (Released from Training Programme – with or without specified competences) and 58 Trainees received an Outcome 8 (Out of programme for clinical experience, research or a career break).

As a result of the COVID-19 pandemic, two new outcomes were created to provide the opportunity to note where there has been disruption to training as a result of the pandemic. These outcomes were Outcome 10.1 (Progress is satisfactory but the acquisition of competencies/capabilities has been delayed by COVID-19 disruption) and Outcome 10.2 (Trainee is at a critical progression point. Progress is satisfactory but the acquisition of competencies/capabilities has been delayed by COVID-19 disruption). For Hospital Specialty Training, 161 Trainees received an Outcome 10.1 and 22 Trainees received an Outcome 10.2. There were two requests for an appeal against Outcome 3 and one request for an appeal against an Outcome 4 for the 2019-20 academic year; the original outcome was upheld for all Trainees.

There are three main recruitment rounds to fill vacancies with some additional recruitment events for a number of specialties. NIMDTA works to try and maximise the fill rates whilst ensuring that the national thresholds for appointment are maintained. The COVID-19 pandemic significantly impacted recruitment processes taking place between March and June 2020 for Trainees commencing in post in August 2020. Derogations to the standard process were employed to ensure that recruitment to specialty training programmes could continue.

In August 2020, there was a fill rate of 91% for Hospital Specialty Training, 402 training posts were advertised with a total of 364 filled. At the start of the academic year in August 2020, 125 training posts were vacant due to resignations, maternity leave, sick leave, completion of training and out of programme training. This increased to 159 vacant posts by February 2021. The Minister approved an expansion in the Intensive Care Medicine training programme by four posts from August 2020.

### Dentistry Training

**Dental Foundation Training (DFT)** is based on the National Dental Foundation Training Curriculum and Assessment Framework. This programme is delivered in the general dental practice setting. The Committee on Dental Foundation Training (CDFT(NI)) provides governance and advice on the Foundation Training scheme, supporting the Postgraduate Dental Dean in identifying and managing areas of concern and good practice within Dental Foundation Training.

In response to the significant impact of the COVID-19 pandemic, a number of changes were required during the training year 2019-20 and for the September intake in 2020. In conjunction with the HSCB, Foundation Dentists (FDs) were temporarily redeployed to pharmacies across Northern Ireland. FDs were required to complete a weekly COVID-19 monitoring survey to assess the impact on individual training experience. Educational programmes were redesigned in immediate response to restrictions and delivered virtually. FDs were granted a three month extension to training. All 28 FDs satisfactorily completed training.

In 2020-21, FDs were provided with personal protective equipment and these were customised appropriately by facilitating mask fitting sessions. The standard induction programme was extended by an additional ten weeks when educational content was prioritised in order to allow for a readjustment and return to clinical activity after the second COVID-19 surge. Extended induction included the provision of a 'phantom head' to each Trainee; as well as in practice and online Study Day programmes.



Foundation Dentist Support meetings were introduced affording the opportunity for FDs to meet for a three way conversation with their Educational Supervisor (ES) and a NIMDTA Dental Advisor. This was to help tailor training to reflect the impact of COVID-19 and associated enforced absence at practice level. This was identified by all concerned as a very helpful initiative and has now been integrated as a standard component of the training programme.

The opportunity to shadow a Dental Core Trainee (DCT) for a day was maintained despite COVID-19 challenges following a successful pilot and positive FD feedback in the preceding year. The opportunity to shadow an Oral Surgeon within a high street Oral Surgery practice was also provided again, and received positive feedback.

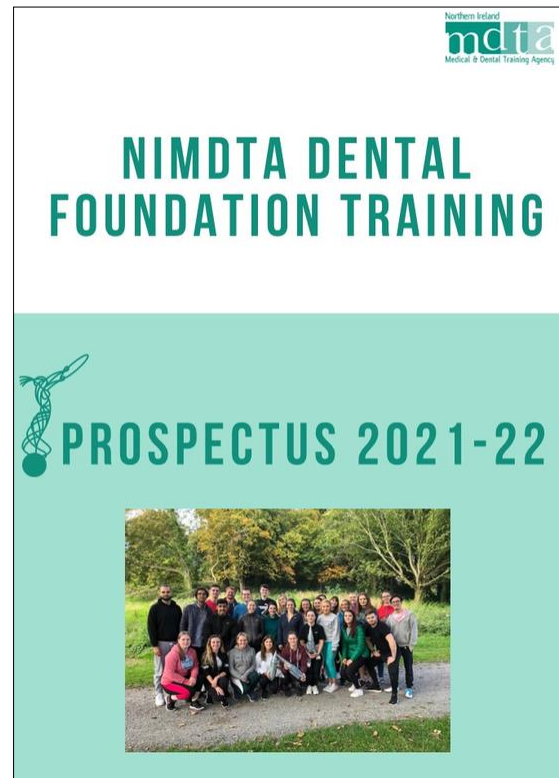
APLAN (Anonymous Peer Learning & Assessment Network) which was introduced within the 2018-19 training year for FDs and ES was continued throughout the pandemic with virtual delivery during the 2020-21 training year. APLAN allows for anonymous peer assessment of clinical cases completed by FDs and is now an integral part of the programme after a successful pilot.

A QI working group was established to review the induction and welcome pack for FDs. The group agreed that a prospectus should be created for interested undergraduates and to improve the welcome and introduction for future FDs. Due to a change in the recruitment timeline for 2021 DFT commencement, it was agreed that the prospectus would be available for the incoming 2021 FD cohort.

In 2020-21, 28 Trainees were allocated to NI as part of a broader National Recruitment process.

**Dental Core training (DCT)** is optional for dental graduates and facilitates additional experience in a hospital-based environment. Completion of DCT Year 2 is an essential criterion for specialty training in dentistry. Training is monitored on an ongoing basis by the Hospital Dentistry Committee at NIMDTA, supported by the Associate Postgraduate Dental Dean and the TPD for Dental Core Training.

As part of COVID-19 mitigation NIMDTA requested that 2019-20 DCTs complete a weekly COVID-19 monitoring survey to assess individual impact on training experience. This was



continued for the 2020-21 cohort of DCTs. Educational programmes were redesigned in immediate response to restrictions and delivered virtually. This was also the case for the 2020-21 cohort. Twenty-two DCTs were appointed in 2020-21. DCTs were offered the opportunity to participate in a series of online training sessions on Systematic Reviews following feedback from Trainees in previous years.

**Dental Specialty training** introduced a new post in Dental Public Health with an appointment made. This is a new programme and it will be delivered in collaboration with the Public Health Agency. Two additional Specialty posts were appointed in Oral Medicine and Oral Surgery respectively. All three posts were appointed through National recruitment and will commence in September 2021. Within the training year, NIMDTA joined the National Specialty ARCP process for Oral Maxillo and Facial Pathology (OMFP) and Oral Medicine. This national approach will continue for the 2021-22 training year. There will be a total of ten Specialty Trainees in posts in September 2021 maximising the use of available funding.

### Academic Training

NIMDTA also provide Trainees with opportunities to undertake academic training. A Clinical Academic Training Board was established in December 2007 between the QUB School of Medicine, Dentistry and Biomedical Sciences in partnership with NIMDTA and the Belfast HSC Trust to oversee research training for medical and dental Trainees.

DoH provides the budget for this scheme which is administered and facilitated through NIMDTA. There are three types of posts:

1. Academic F2 – this is a four month placement designed as an opportunity to explore academic medicine
2. Academic Clinical Fellows (ACF) – these are normally two year posts for those who have yet to complete a research degree
3. Academic Clinical Lecturers (ACL) – these are normally three year posts and candidates will usually have already completed a PhD or MD.

There were nine appointments at Foundation level, four appointments at Specialty level and five to the GP Academic Research Training Scheme (GPARTS) in 2020-21. The Dental Department has developed a DCT ACF/ ACL two year post, in conjunction with QUB. This post is due to commence in September 2021 and provides an opportunity for Dentists to nurture an interest in academic work early in their career. DoH also confirmed that recurrent funding is available to expand the Clinical Academic Training Programme by 50%.

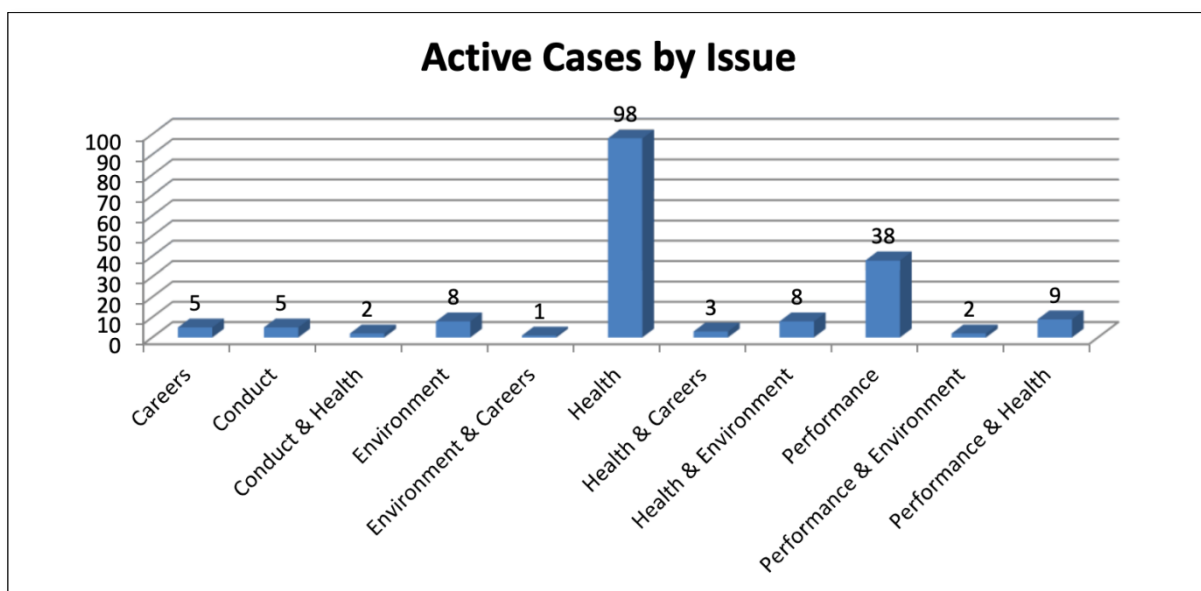
## Support for NIMDTA Trainees

NIMDTA Professional Support Unit (PSU) provides a range of services to support Trainees in postgraduate training programmes in Northern Ireland. A one-to-one Trainee support service is available to Trainees who are referred by their Educator for support or a Trainee can self-refer. Trainees who are experiencing exam difficulty may also avail of the services of an Educational Assessment for Dyslexia and for Dyslexia Coaching if there is a positive diagnosis of Dyslexia. Coaching and Mentoring services are also provided through peer mentoring schemes and one to one coaching. Meetings with the heads of training are held annually to receive feedback on the service provided to Trainees in their training programmes. This helps develop and improve the service. Educational programmes are also provided to Educators to train Educators on how to support Trainees in their programmes and to promote the services of the PSU.

### *One-to-one support*

The Professional Support Unit received a total of 154 new referrals during 2020-21 which was similar to activity during 2019-20. The active caseload in March 2021 was 179 Trainees. PSU has moved to holding virtual meetings with Trainees due to the pandemic but this method of meeting has worked well and will continue as one option for Trainees when NIMDTA offices re-open.

The new referrals received during this period by referral issue are illustrated below:



Health and Performance continue to be the main reasons for referral in 2020-21.

### *Careers Guidance*

The Associate Postgraduate Dean for Careers and Professional Development is the NIMDTA Lead for Careers support. Dr Camille Harron sits on the national MDRS Careers Group and networks with other Medical Career Leads in the UK. She is also completing a Masters' Degree in Career Management. Planning has taken place for a virtual careers workshop in June 2021 where NIMDTA will provide two workshops. Foundation Year 2 Trainees receive a careers module as part of their generic skills training by PSU. Careers talks for Foundation Year 1 Trainees are also provided by Dr Harron.

### *Mentoring*

Dr Mary Murnaghan is the PSU Mentoring Lead. PSU provides mentor training for both mentors and mentees and a peer mentoring scheme for Foundation Trainees, Trainees new to Northern Ireland and Trainees who have attended one-to-one support. The NIMDTA mentoring working group continued to meet despite the COVID-19 challenges and while mentoring training was paused following the first wave of the pandemic, it restarted in a virtual format in the summer of 2020 with 5 theoretical training programmes and 1 practical training programme delivered before the end of the financial year. NIMDTA invested in dedicated software Mentor-Net to improve accessibility of the mentoring scheme to mentors and mentees. This system is being set up by the Professional Support Manager, Mrs Gillian Dennison.

### *Coaching*

Dr Ciaran O'Gorman is the PSU Coaching Lead. The coaching service was paused in April 2020 due to redeployment of clinical staff in response to the COVID-19 pandemic. It was restarted in September 2020 and efforts to expand the coaching service were achieved through negotiations with the South Eastern Trust Coaching Service who offered coaching services to Trainees based there. NIMDTA Coaches continue to undertake coaching supervision with Mrs Paula O Kelly, Principal Consultant at HSC Leadership Centre.

### *Educational Assessments*

NIMDTA provides educational assessments for Trainees who have repeated exam failure. To date, 100 Trainees have availed of an Educational Assessment. Twenty-three Trainees had Educational Assessments in 2020-21 with 75% of those tested showing evidence of dyslexic learning difficulty despite many Royal College exams being postponed in the early part of 2020. All Trainees with a positive diagnosis of Dyslexia are offered one-to-one meetings to review support resources. Access to specialist Dyslexia coaching has also continued.

### *Equality, Diversity and Inclusion*

The Equality Diversity and Inclusion working group met on three occasions during this period. Trainee ambassadors who were new to training in the UK attended these meetings to help NIMDTA produce a policy to support international medical and dental graduates coming to train in Northern Ireland. Roisin Campbell, Senior Manager Professional Support continues to provide Equality, Diversity and Inclusion training for recognised Trainers and Educators who support NIMDTA in delivering specialty training programmes. The PSU also provides one to one guidance to Trainees who require sponsorship to undertake postgraduate training in Northern Ireland and has purchased a premium service with the UK Visa and Immigration Service to ensure all queries are dealt with in a timely manner so that this does not create any difficulties to those coming to training in Northern Ireland.

### *Faculty Development*

PSU staff continues to contribute to the development and delivery of Achieving and Maintaining Recognition courses. The Advanced Trainee Support training session which was piloted in January 2020 is now a regular part of Faculty development with excellent feedback and requests for additional training. Planning is underway for the PSU conference to be held on 22 April 2021. In 2021-22, the conference will be held virtually.

### **Development of Recognised Trainers based in Local Education Providers**

From August 2016, all Clinical and Educational Supervisors are required to be recognised by the GMC, in line with NIMDTA's Achieving and Maintaining Recognition policy.

The NIMDTA Recognition of Trainers Programme is called STATUS:

<b>S</b>	Selection of Trainers for role using a competency based application
<b>T</b>	Training for role
<b>A</b>	Appraisal for Educational Role included within each Doctor's annual appraisal
<b>T</b>	Transfer of Data from Trusts to NIMDTA
<b>U</b>	Underperformance management
<b>S</b>	Supporting for role (PA allocation, course development, engagement)

The training that is required as part of this STATUS programme is:

<b>S</b>	Supervisory Skills
<b>T</b>	Teaching the Teacher
<b>A</b>	Anti-discriminatory (online module on equality and diversity)
<b>T</b>	Trainee Support
<b>U</b>	Unique to
<b>S</b>	Specialty

As a result of the COVID-19 pandemic, training events continue to be delivered online at NIMDTA. Feedback and attendance have been very positive. By 31 March 2021, 1424 hospital Trainers have been fully recognised.

NIMDTA continues to publish Recognised Trainers newsletters with recent updates on changes to guidance, course dates and recognition updates. The NIMDTA website has also been updated with a dedicated area for Trainers including policies and guidelines. A digital Recognised Trainer Guide was provided to all Trainers in 2020-21.

A Recognised Trainer Forum was established in February 2019 as a means to provide educational learning, networking with peers, and engagement with NIMDTA and continues to meet bi-monthly online to improve engagement with Recognised Trainers.

**RECOGNISED TRAINERS NEWSLETTER**  
June 2020 | Issue 14

Dear Educator and Supervisor,

These have been challenging times for us all, and I hope you are well and surviving the new working environment and lockdown. I do not wish to burden you with more emails, but wished to provide you with some of the information needed for ARCPs, Maintaining Recognition and some NIMDTA news.

ARCP panels will be smaller and virtual and the ES report will be even more important for the panel as other supporting evidence may not be available. I have included some guidance in the newsletter and more information is available on the NIMDTA website.

Maintaining Recognition dates have been extended by 12 months for those who are expected to renew their recognition by September 2021 and may be extended further. We are also reviewing our policy on requirements, especially regarding online learning. The Faculty Development Team are planning online learning developed by NIMDTA, and I have included some links to some on line learning resources from a variety of providers which you may find helpful.

Many thanks for all your hard work at this very difficult time.

**UPDATE FROM RECOGNISED TRAINERS TEAM**

Written By  
Dr Joanna Turner,  
Associate Dean for Recognised Trainers

**IN THIS ISSUE**

- ARCP Guidance
- Interim FI
- Achieving Recognition
- Online Education, Learning & Development
- Appointments & Vacancies

## Training of GP Trainers

There is a need to increase capacity for training and numbers of GP practices. A second course was delivered, aimed at practices that are new to training. Following these two courses, 64 new Trainers were appointed. Currently, there are 408 GP Trainers in 195 different training practices. Fourty new GP Trainers were appointed in April 2020-21 and 11 Trainers have retired. A further 24 were trained later in the year. Each year there is continued interest from potential Trainers who apply for and successfully complete the Learning and Teaching Course.

The course aims to provide basic training for a competent, confident teacher in General Practice by:

- Providing a facilitative learning environment
- Involving participative and flexible learning methods
- Supporting personal development
- Developing skills of critical thinking and self-evaluation
- Modeling good educational practice.

GPs who complete the Learning and Teaching Course, submit a portfolio and those who are successful at the practice visit become accredited Trainers in GP. GPs then enter into a run through training programme for one year provided by NIMDTA to enhance one-to-one and group skills in advance of hosting a Trainee in practice.

All Trainers regularly meet with their colleagues within their area group to share learning and receive training from Programme Directors and Associate Directors on current issues. These locality learning days form part of the mandatory requirements for Trainer re-accreditation along with three-yearly practice visits. These practice visits has been delayed due to COVID-19 restrictions and many have been done virtually. Further information is available from <http://www.nimdt.gov.uk/general-practice/specialty-Trainers-and-practice-managers/>

The Trainer Groups organise a minimum of two training sessions per year. In the last year, topics covered have included:

- Trainee Support
- Equality, Diversity and Opportunity Training
- Teaching the Teacher
- Supervisory Skills.

NIMDTA also provides training for the following groups:

- Clinical Supervisors in Out of Hours
- Practice managers
- Peer review training for GP Trainers.

NIMDTA regularly meets with the Trainer Convenor's group to improve information sharing and good practice. This has been disrupted this year due to COVID-19 restrictions and GP pressures.

### Training of GP Appraisers

The training of GP Appraisers occurs through a number of formats. All new Appraisers participate in a full day (or two half days) of initial training followed approximately six months later by a further half day training session. These initial training sessions are facilitated by the Regional Appraisal Co-ordinator. Appraisers are also assigned to a locality group and supported by a 'lead' Appraiser in that area. The Lead Appraisers provide ongoing guidance, support and feedback to the Appraisers in their group. Appraisers who become Lead Appraisers receive training and support in this role from their fellow Lead Appraisers and the Regional Appraisal Co-ordinator.

During the 2020-21 appraisal year, as a result of the Covid pandemic, the first annual appraisal conference scheduled for June 2020 was cancelled. The second appraisal conference went ahead in November 2020. Due to ongoing social distancing restrictions, this meeting was held via Zoom. In addition four new Appraisers were appointed in January 2021 and participated in two half-day training sessions, again these were via Zoom.

In addition to the formal training, the Lead Appraisers support their appraiser locality groups during the year through group meetings (again via Zoom in the 2020-21 year) and ongoing email and phone contact to address specific queries and training issues. The Lead Appraisers also meet throughout the year with the Regional Appraisal Co-ordinator to address training needs, challenges and developments in GP appraisal. These meetings continued via Zoom during 2020-2021.



## Training of Dental Professionals

The Dental Department provides a Continuing Education Programme for Dentists and DCPs. The Continuing Education Programme is compliant with the GDC enhanced requirements for Continuing Professional Development (CPD) which were introduced during 2017-18.

Due to the COVID-19 pandemic, the April-June 2020 Continuing Education (CE) calendar was initially postponed, however NIMDTA responded quickly to the pandemic with a series of online events that were well received.

NIMDTA promotes multi-disciplinary team development through the Dental CE programme for Dentists, DCPs and for Dental Teams. The September-March 2021 CE Programme was attended by 349 dental registrants.

Online in-practice training sessions were also offered for Radiography, Safeguarding children and Adults, and Decontamination and Infection Prevention and Control (IPC). The team worked to provide these sessions in compliance with ongoing restrictions.

Unfortunately due to COVID-19 restrictions, all hands-on training sessions were cancelled. The pre-existing hands-on workshop for Radiography was redesigned and piloted as a remote online session and was positively received.

NIMDTA has collaborated with an English Deanery to pilot the use of a Dental Nurse Assessment Tool (DNAT) for nurses working with foundation dentists aiming to provide supportive constructive feedback to FDs. This work is ongoing.

In response to the mental health impact of the COVID-19 pandemic, the Dental CE Team plan to run a series of 'Looking After your Mental Health' online lunchtime sessions.

**Dental CE Autumn Newsletter** September 2020

**Take control of your wellbeing**  
General Dental Services Assistance Programme

**The General Dental Services Assistance Programme (GDASP)**  
provides free, independent and immediate support for GDS Contracted Dentists, dealing sensitively with personal and professional issues that may impact on home or work life. Privacy and confidentiality are guaranteed in the provision of unlimited access to 24 hour telephone counselling and face to face counselling.  
The Inspire Support Hub widens the support available to GDS Contracted Dentists and gives instant access to a range of information, guidance and intervention tools tailored specifically to help care for individual well being needs.

To avail of the GDASP, call free on 0800 389 5362.

**CPDA Claims**  
All six CPDA sessions may be claimed for online activity for 2020/21. Practitioners may also claim video conference based teaching for all six sessions  
Please contact DentalFinance.BSO@hscni.net if you have any queries

**Motivating your team and staff morale**  
Monday 28 September 2020, 6.30 p.m.  
Online via Zoom  
At the end of this session delegates should be able to:  
• Identify the characteristics of an effective team  
• Discuss team leadership styles  
• Reflect on the need for role variety within a team  
• Examine a model of team communication  
• To reflect on team morale in the Covid era

These courses will help you promote best practice

**IPC Refresher**  
Monday 21 September 6.30 p.m.

**Four-handed Dentistry**  
Thursday 8 October 6.30 p.m.

**Decontamination Refresher**  
Wednesday 14 October 6.30 p.m.

Meet your GDC Requirements for Equality & Diversity  
**Trans Inclusion & Cultural Competency**  
Monday 5 October 2020, 6.30 p.m.  
This session will help delegates to understand the context within which trans individuals in NI currently live and how trans individuals are supported and included as service users and colleagues

Please contact us at dentalcourses.nimdtahscni.net if you have any queries or require further information

A number of additional hands on educational opportunities for DCPs are under development for 2021-22. The Dental CE Team plan to deliver training sessions using the newly acquired Simodont Units and the realistic nature of the simulated experience will be hugely beneficial for Trainees and Practitioners to hone skills. This in turn will ultimately improve patient care.

The Dental Team worked collaboratively to redeploy their skills as required in the peak of the pandemic. The Dental Care Professional Tutor provided assistance to HSCB during this time, advising on infection prevention and control, organising mask fitting for General Dental Practitioners and working within the newly established Dental Urgent Care COVID Centres. Two members of the Dental Team were also redeployed in return for their General Dental Practitioner duties to provide extra support to foundation dentistry to manage the COVID-19 impact.

The Dental Team have redesigned, reviewed and updated all external facing documentation during this training year, to include all training guides for Trainees.

Dental recruitment for ESs was successfully modified and delivered online as were a number of additional internal recruitment process.

### **Retention and Induction of GPs**

The GP department has been working collaboratively to recruit, retain and induct GPs into the NI workforce. NIMDTA's role in the Career Development Scheme is to provide educational support and career guidance to Doctors on the Induction and Refresher (I+R) Scheme and the GP Retention Scheme. It is also to facilitate the arrangement of relevant assessments through the GP National Recruitment Office and to facilitate practice placements for the I+R Scheme. Satisfactory completion of the scheme enables admission to the NI Performers' List. During 2020-21, two applicants completed the I+R Scheme and three are currently part way through the process. This reduction in numbers is directly related to the COVID-19 pandemic influencing the ability of Doctors to relocate to NI.

The GP Retention Scheme has been at a maximum capacity of 25 Doctors for much of 2020-21. An online educational programme (comprising 11 events) was provided to this group via Zoom from September 2020 to March 2021, having been restricted by COVID-19 workforce pressures earlier in 2020.

As a direct result of the COVID-19 pandemic, a national call was made in March 2020 for retired GPs to return to the workforce.

NIMDTA was asked by HSCB to provide induction and support for these GPs returning through the Emergency Response Practitioner (ERP) Scheme.

A total of 51 GPs re-joined the workforce and received an induction and educational resources.

### Training in Quality Improvement

QI training has been provided for NIMDTA Foundation Trainees for five years through the Generic Skills programme. QI training has been available for NIMDTA GP Trainees since 2014-15. These GP Trainees are afforded opportunities to use these skills in specific projects during their ST2 year.

QI training is delivered to Medical and Dental Specialty Trainees through the iQUEST Generic and Professional Skills Programme.

Foundation and Specialty Trainees have opportunities to put QI skills into practice during their attachments to HSC Trusts. The South Eastern (SQE programme) and Belfast (Safety and Quality) HSC Trusts have very active QI programmes within which NIMDTA Trainees are offered opportunities to be involved.

In December 2016, NIMDTA introduced ENGAGE, a Leadership and QI programme aimed at final year Trainees in GP, Hospital Specialty and Dental Specialty training programmes. ENGAGE aims to challenge, develop and support Doctors and Dentists in Training to ensure that they are prepared to lead effectively. This programme is delivered, on behalf of NIMDTA by the HSC Leadership Centre and successfully transitioned to online delivery as a result from the COVID-19 pandemic. The fifth year of this programme ran in 2020-21 and is expected to reach completion with an online Showcase Event in June 2021.

### COVID-19

This pandemic has had a significant impact on every area of NIMDTA's activities.

This has been particularly the case with regard to aims of Goal 2: Strengthening the Workforce:

1. "provide the right education, training and support to deliver high quality care"; and
2. "develop leadership skills at all levels."

Many educational activities were stood down or postponed (professional examinations; formal education; mandatory courses; study leave; planned rotations; recruitment; annual Trainee reviews; quality management visits and surveys) and postgraduate Educators have stepped down from educational roles to support the clinical response to the pandemic.

Hundreds of Trainees were redeployed, across specialty boundaries into different units and hospital sites, to support the HSC response to COVID-19.

In respect of leadership skills, most of the Out of Programme Clinical Leadership Fellows (ADEPT) stepped back into full time clinical work in HSC Trusts during this pandemic. Recruitment into the ADEPT scheme for 2020-21 was cancelled due to the pandemic.

**Depending on the course and impact of the COVID-19 pandemic, NIMDTA plans for next year are:**

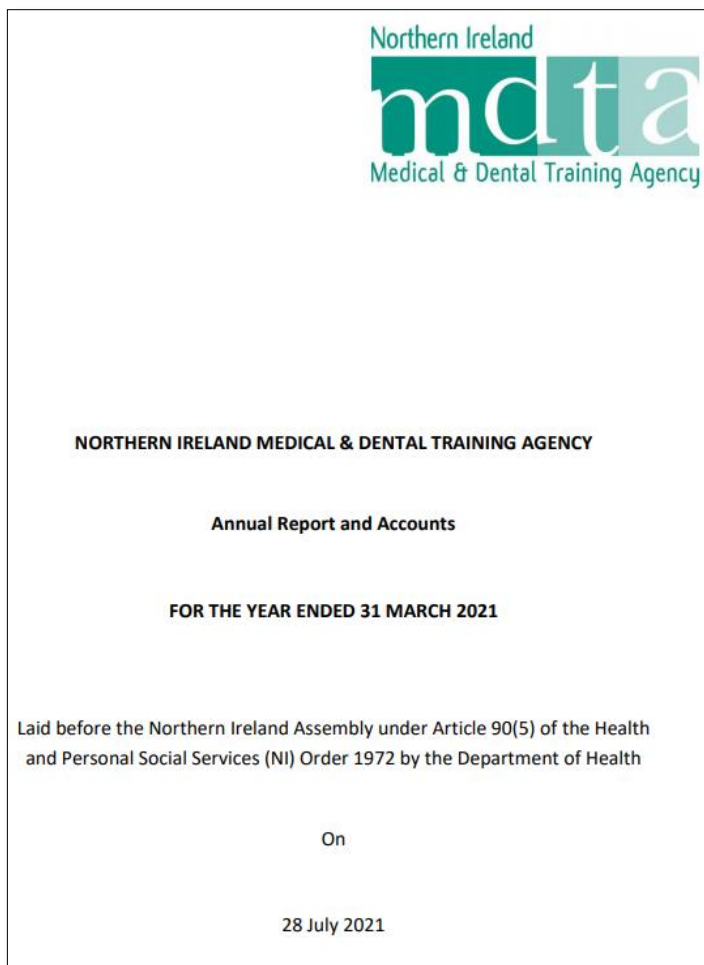
1. Further extend the **Peer Mentoring Scheme** during 2021-22, with pilots being planned in different specialties.
2. In collaboration with QUB, NIMDTA has organised its **10th Annual Clinical Education Day** for Friday 10 September 2021 aimed at undergraduate and postgraduate Teachers, Trainers and Educators. This programme will be delivered online this year in response to restrictions associated with COVID-19.
3. In collaboration with QUB and the Ulster Medical Society (UMS), NIMDTA has again organised a virtual **Research for Clinicians Day** on 04 November 2021.
4. In collaboration with QUB, NIMDTA had planned to hold its sixth **Annual Professional Support Conference** on Thursday 22 April 2021 online since being postponed in 2020-21 due to COVID-19.
5. Offer further **courses for Recognised Trainers** in 2021-22 in Training Unique to Specialty and Supervision of GP Trainees in Hospital Specialty Posts.
6. Further expand opportunities in **simulation** across education and training in 2021-22.
7. Provide a networking and training event for all appointed **Clinical Facilitators** during 2021-22 for the Generic Skills, iQUEST and STATUS programmes.
8. Continue to work with the **HSC Leadership Centre** on developing training opportunities for NIMDTA Educator and Education Management staff.
9. Host a range of **Staff Development and Well-being** events during 2021-22 including an opportunity for Band 4 staff to attend First Line Manager training and Band 3 staff to attend a Staff Development Programme.

10. Deliver a comprehensive four-day hands-on training session on **Minor Oral Surgery for Practitioners and Suture Removal** in 2020-21 in response to demand from users.
11. Continue to extend the 2019-20 pilot of the **Dental Foundation Dental Nurse** course from September 2021.
12. Work with DoH, HSCB, PHA and HSC Trusts to ensure that **restart of postgraduate medical and dental education** post-pandemic is fully integrated into HSC plans to rebuild clinical services.

## Goal 3: Measuring the Improvement

**Quality 2020 Aim:** *We will improve outcome measurement and report on progress for safety effectiveness and the patient/client experience. We will promote the use of accredited improvement techniques and ensure that there is sufficient capacity and capability within the HSC to use them effectively.*

### NIMDTA Board



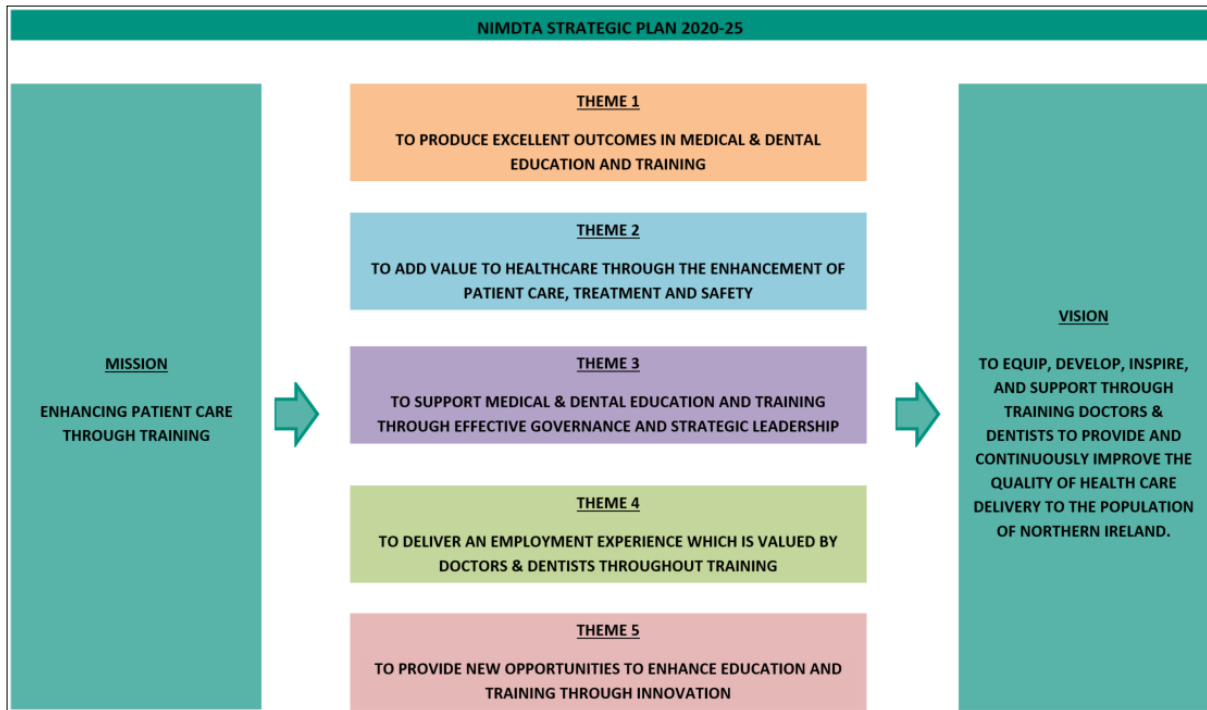
NIMDTA is accountable to DoH through completion of reports and participating in Accountability Reviews (Chair and Chief Executive). The Chair of the Board is appraised annually by the CMO, and the Chair in turn appraises the other non-executive members of the Board. SMC members report to the Board on the quality of performance of NIMDTA's education and business departments.

The Board reviews a self-assessment annually that facilitates reflection across a number of domains of expected practice.

The work of NIMDTA was shaped by our Business Plan 2020-21, in the operational context of the pandemic response.

### NIMDTA Strategic Plan

An aid in monitoring performance is the regular updating of a Corporate Scorecard, which is considered by the Board throughout the year. The following table shows NIMDTA's performance against the key performance indicators, which are documented on the scorecard:



**CORPORATE SCORECARD 2020-21**

KPIs		Status
1	90% of referrals to the Professional Support Team will be responded to within two weeks	ACHIEVED [98%]
2	90% of hospital based trainers are recognised trainers	ACHIEVED [98%]
3	Staff absence rate will be less than 5.5%	ACHIEVED [1.21%]
4	30 day (95%) prompt payment targets will be met	ACHIEVED [99%]
5	10 day (75%) prompt payment targets will be met	ACHIEVED [97%]
6	Learning and Development Agreements are circulated to local education providers by April	ACHIEVED [100%]
7	80% of postings will be disseminated to LEPs 8 weeks before the post start date	ACHIEVED [100%]
8	10% of ARCP outcomes will be subjected to external review	N/A* [%]
9	Annual appraisal is offered to 100% of GPs on the performers' list	ACHIEVED [100%]
10	90% core subjects are covered within Dental CE courses	ACHIEVED [100 %]
11	Breakeven as defined by DoH will be achieved	ACHIEVED [0.06%]

*\*As a result of the COVID-19 pandemic, the four Statutory Education Bodies produced derogations from the Gold Guide v8, including guidance around the composition of ARCP panels. This derogation noted that due to the expected difficulties in releasing panel members from clinical services during the pandemic, ARCPs could take place without the need for externality, both from a clinical and lay perspective.*

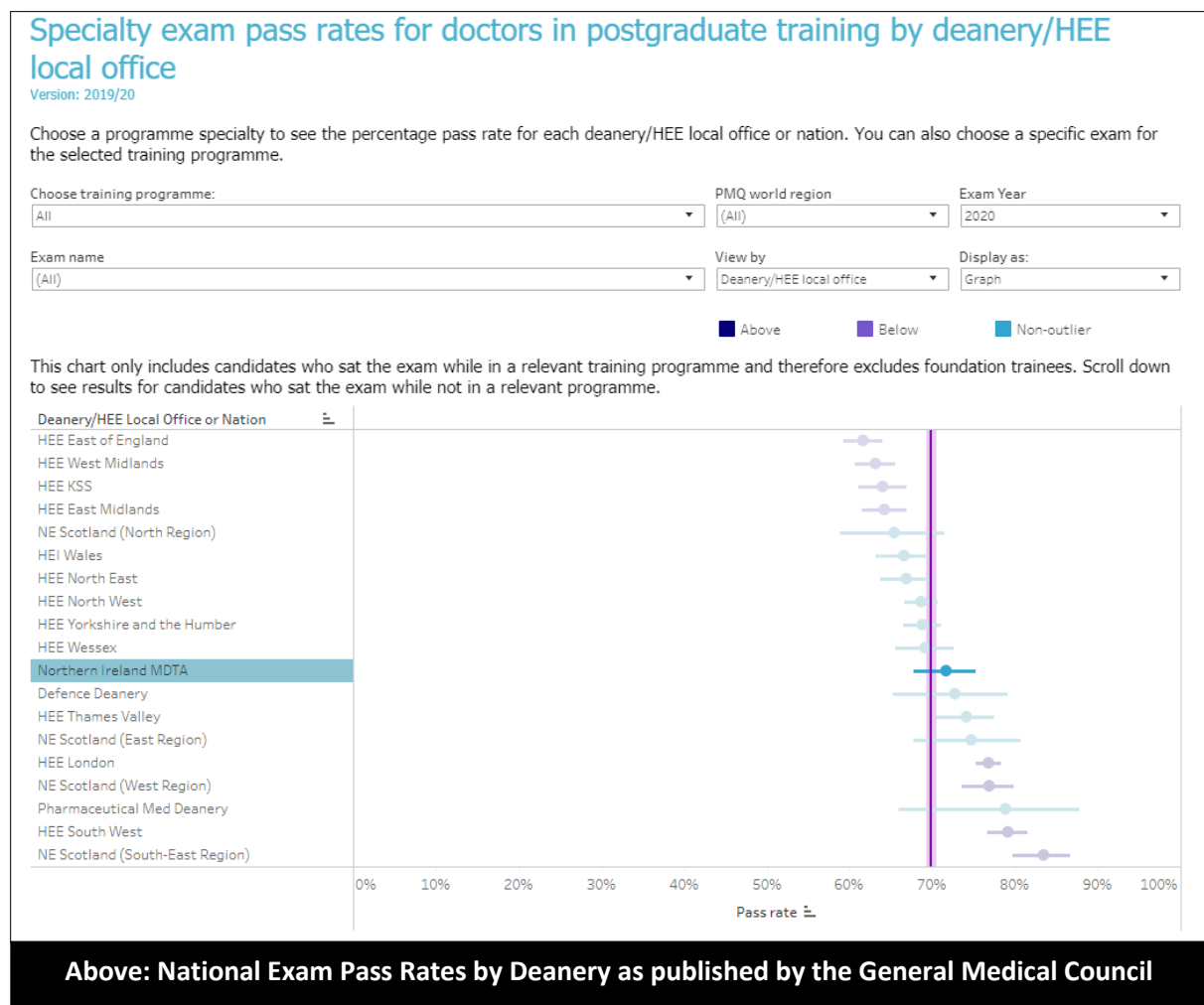
## NIMDTA Educators and Administrative Staff

The quality of performance of NIMDTA Senior Educators, Senior Managers and Team Leaders is considered by formal appraisal annually. Education Management staff members are in turn appraised by Team Leaders in each department annually.

The performance of Heads and Deputy Heads of NIMDTA Specialty Schools is assessed during annual review of each Specialty School. The quality of training delivered by a NIMDTA training programme and the leadership of the TPD is considered through review of the specialty training programme on a regular cycle.

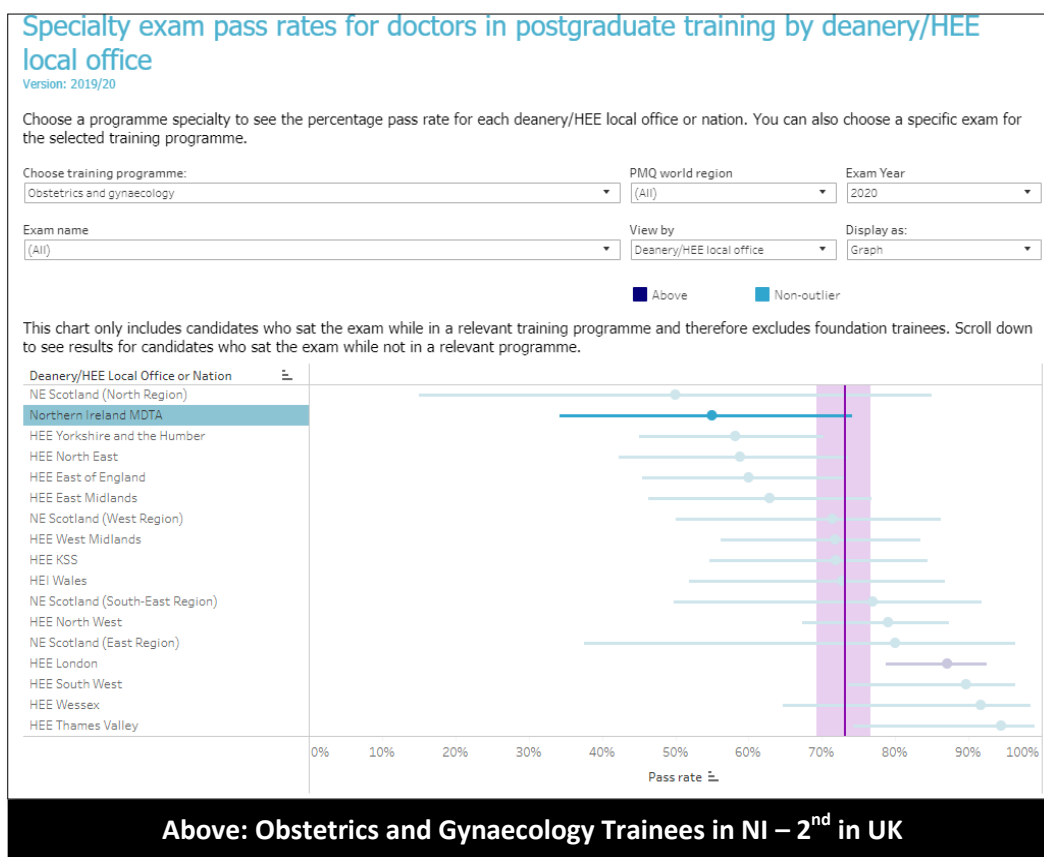
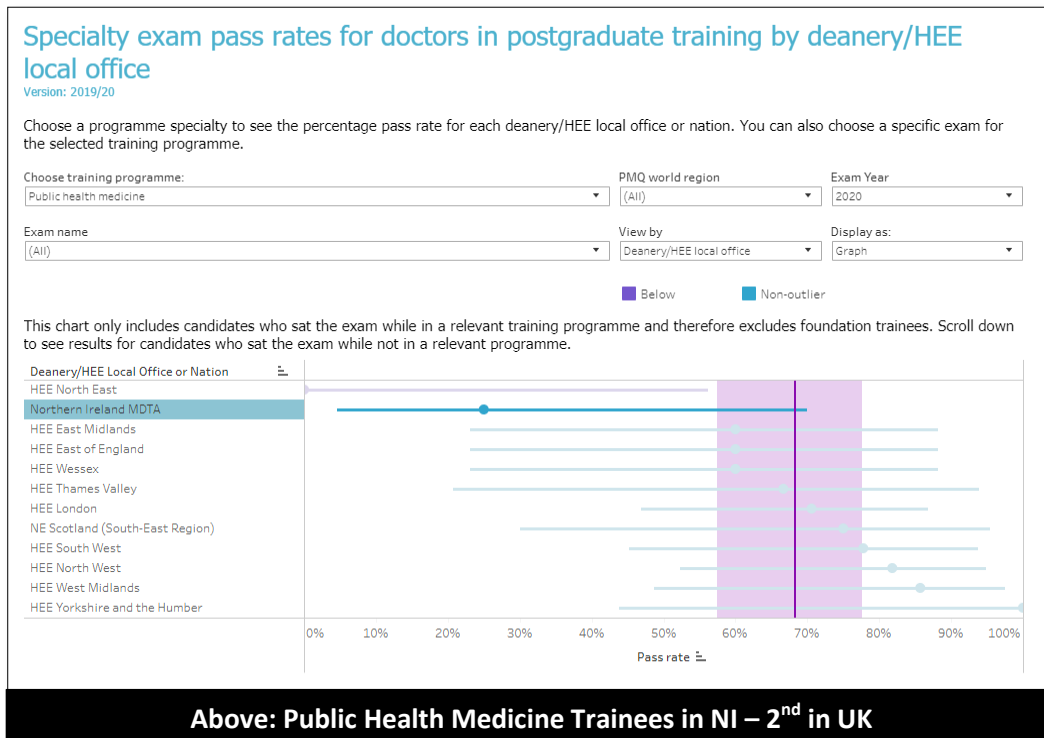
## NIMDTA Formal Training of Trainees

The quality of NIMDTA's provision of formal education is assessed through direct Trainee feedback, the results of the GMC National Trainee Surveys, progression of Trainees and Trainee success in examination results.





NI Trainees performed particularly well in Specialty Examinations in Public Health Medicine, Obstetrics and Gynaecology and Clinical Radiology in comparison with Trainees from other regions of the UK.



The SUCCEED Postgraduate Education Fellowship commenced in August 2019 as a pilot. These fellowships are an outworking of the Supporting Training, Covering the Curriculum and Enhancing Prospects actions of the NIMDTA SUCCEED Strategy. The fellowships aim to enable core level Trainees to maximise their potential for success at examinations, to help specialty schools develop their training programmes to include the implementation of curricular changes, to enable higher Trainees to advance their careers by developing a special interest in medical education and to provide Trainees with the opportunity to contribute to QUB undergraduate curriculum delivery. Fellows are appointed for a fixed term of one year and have a notional one day per week specifically allocated to undertake their duties. Feedback from the pilot in 2019 involving Anaesthetics and Psychiatry from the Schools involved exceeded expectations, with as well as a demonstrable improvement in examination results. As a result of its success, NIMDTA expanded this programme from August 2020 to include Obstetrics & Gynaecology, Paediatrics and Emergency Medicine. It is hoped that further expansion will take place in 2021-22.

The GMC National Training Survey (NTS) for Trainees considers 18 different indicators to measure Trainees' satisfaction with the postgraduate medical education and training that they are receiving in their Deanery in comparison with Trainees in other Deaneries or HEE's local offices.

The 2020 GMC National Training Survey was postponed due to the pandemic. Following consultation with stakeholders, the GMC launched a shorter, targeted survey which specifically asked about Doctors' experiences of working and training during the pandemic. The response rate from NI Trainees was 52.25% (3rd highest in UK) and the response rate from Trainers was 31.6% (2nd highest in UK). Given the changes to the survey, the findings were not reported in the usual format and results were published for each individual question rather than indicator.

Feedback from Trainees on NIMDTA formal education events is collected online using the Intrepid Course Management System, which requires Trainees to complete an assessment of the education delivered before a certificate of attendance is provided. Feedback from Trainees is scrutinised and contributes to the strengthening and enhancing of these training days.

Recruitment to training programmes is also monitored and reported through national recruitment offices.

## Learning and Development Agreements (LDA)

NIMDTA has an educational contract (LDA) in place with each Local Education Provider (LEP) which sets out the respective responsibilities of both NIMDTA and LEPs in the management and delivery of postgraduate medical education and training. This LDA is monitored for compliance and is reviewed annually. In addition, NIMDTA has agreed an SLA with each GP Trainer.

Joint NIMDTA and LEP Annual Reviews took place throughout 2020-21 to discuss developments in postgraduate medical and dental education and training and to review the effectiveness of the Learning and Development Agreement (LDA) between NIMDTA and the LEP in ensuring that minimum standards set out by the GMC in “Promoting Excellence” are met. This is also an opportunity to identify and share good practice. In addition, regular meetings take place between the Postgraduate Medical Dean and individual Trust Medical Directors, which are extremely helpful in maintaining and building strong working relationships between the respective organisations.

NIMDTA Senior Educators and Senior Managers meet regularly with the HSC Trust Directors of Medical Education at the Postgraduate Medical Education Forum and with Medical Education Managers at meetings of their regional group.

## Training in Educational Units

NIMDTA is responsible to the GMC for the educational governance of all approved Foundation and Specialty Training Programmes, including General Practice, and is expected to demonstrate compliance with the standards and requirements that the GMC sets out in [Promoting Excellence](#).

NIMDTA oversees and coordinates its GMC-delegated responsibilities for Quality Management through the NIMDTA Quality Management Group (QMG), which usually meets every two weeks. The QMG monitors, manages and improves postgraduate medical and dental education through a collaborative partnership with the Regulator (GMC and GDC), LEPs and the other stakeholders.

NIMDTA has in place a Quality Management Framework to ensure that Local Education and Training Providers meet the standards and requirements set by the GMC, COPDEND and GDC.

NIMDTA is required to demonstrate compliance with GMC standards and ensure that its quality processes support the development and improvement of postgraduate medical education and training within Northern Ireland. This is done through a system of robust monitoring and inspection visits of LEPs.

During 2020-21, a number of planned Educational Monitoring Activities were postponed from March 2020 due to the pandemic. To ensure that the quality of education was maintained during this time, the Quality team continued to work in partnership with LEPs to ensure existing and new concerns were monitored and action plans in place to address. Planning and delivery of these activities resumed in June 2020 and the Associate Deans for Visits and Curriculum Review carried out a number of Educational Monitoring Activities (Deanery Visits and Specialty Reviews) to General Medicine (2), Haematology (1), Histopathology (1), Neurology (1), General Surgery (2), Psychiatry of Intellectual Disability (1), Genito Urinary Medicine (1), Palliative care (1) and Geriatric Medicine (1).

Reports from these visits were reviewed and assessed by QMG, taking account of LEP action plans before the final reports were released. The outcomes for these visits were shared with HSCB and PHA (through Liaison meetings) and the GMC Quality Reporting System.

### Placement Quality (PQ)

The aim of the Placement Quality work stream is to optimise patient-centred care by identifying benchmarks of quality in the delivery of hospital based education and training and to promote continuous quality improvement of postgraduate medical training posts within Northern Ireland. Placement Quality Reviews involve research into applicable placement quality initiatives across the UK and internationally, review relevant curricula and previous measures of quality, working with Lead Educators and engaging with Trainees via surveys and focus groups to obtain information in relation to their experiences in Northern Ireland.

Placement Quality work was paused in March 2020 due to the pandemic. ADEPT Clinical Leadership Fellows for Placement Quality were redeployed to clinical practice and the Associate Dean supported the safe introduction of the Interim Foundation Year 1. An ADEPT fellow returned on a less than full time basis (2 days / week) between August 2020 and February 2021.

Placement Quality work recommenced in May 2020 and the focuses of the work stream for the remainder of 2020-21 were:

- Publication of the Psychiatry Training Placement Quality Report based on the feedback from Trainees and training sites during August – December 2019. Alongside this, a 'Guide to training in Psychiatry in Northern Ireland' and a Prospectus of all Regional Psychiatry Training sites was produced. A re-survey of the Psychiatry Training programmes was also carried out in January 2021 as a follow up to the 2019 Placement Quality Review. A regional report of the resurvey results was published in March 2021.

- Publication of the Core Surgery Training Placement Quality Report, highlighting regional examples of good practice and identifying key recommendations for improvement of core surgical training placements. A resurvey will take place during 2021-22.
- Publication of five Trust specific F1 Resurvey Reports, which summarise the improvements made to the F1 training experience against the recommendations from the initial Placement Quality Review in 2018, were published in November 2020. These allowed regional and Trust benchmarking to take place and highlighted areas for further development.
- Publication of five Trust specific reports of the Placement Quality re-survey of the Obstetrics and Gynaecology training programme. The reports highlight regional and Trust improvements made to the O&G training experience following the initial Placement Quality survey and identify areas where further work is needed.

The work of the Placement Quality initiative was highlighted at a number of educational events during 2020-21. A workshop, at the virtual NIMDTA / QUB Clinical Education Day on 11 September 2020, shared the outcomes of the re-survey of F1 Trainees, highlighting positive developments and the key recommendations where further actions need to be focused. Additionally, the positive changes resulting from the current Placement Quality Reviews were promoted and recognised nationally through poster presentations at the NACT Foundation Meeting in March 2021. The submitted poster was awarded 1<sup>st</sup> prize as an example of good quality improvement practice.

### NIMDTA Trainee Progress and Revalidation

The Annual Review of Competence Progression (ARCP) takes place annually for each medical Trainee to review progress in training / performance.

An ARCP panel is required to assess the adequacy of the evidence and documentation provided and to make a judgement about a Trainee's suitability to progress to the next stage of training or to confirm if training has been completed satisfactorily. The *Reference Guide for Postgraduate Foundation and Specialty Training in the UK* (The Gold Guide) describe the processes for conducting these annual reviews and were amalgamated from January 2020.

In addition, the ARCP panel is required to consider a self-declaration form from Trainees (Form R), Supervisor's reports and Employer's Exception reports and decide if there are any concerns about a Trainee's suitability to be recommended for revalidation. Revalidation is the process by which licensed Doctors are required to demonstrate on a regular basis that they are up to date and fit to practise. Each Doctor has a Responsible Officer (RO) and has a connection to a Designated Body. The RO is responsible for making recommendations to the GMC as to whether the Doctor is up to date, fit to practise and should be revalidated.

For Doctors in Training in NI, their designated body is NIMDTA and their RO is the Postgraduate Medical Dean. The ROs for Doctors in Training base their recommendations on the outcomes of the ARCP process.

There are therefore two decisions made at each ARCP panel – a decision about whether the Trainee can progress to the next year of their training or complete training and a decision as to whether there are any concerns about their revalidation.

An ARCP panel must contain at least three members appointed by the School Board or Specialty Training Committee. In addition, where an unsatisfactory outcome is anticipated, the panel should contain a senior Deanery representative, an External Advisor and a Lay Representative. Alternative arrangements were however put in place during the COVID-19 pandemic from March 2020 to September 2021.

Reports are requested from the Lay and External Representatives on NIMDTA ARCP panels on the processes and outcomes of the ARCPs. Learning from these reports is considered at QMG and changes are made to the ARCP policy and to the teaching contained in ARCP workshops for Lead Educators.

The NIMDTA Revalidation Operational Group which oversees the processes and procedures regarding revalidation recommendations for Trainees continued to meet regularly throughout 2020-21. Membership of the group includes NIMDTA Senior Educators and Education Management staff, and Trainee, Lay, HSC Trust and GMC Representatives. The Group reviewed updates and reports from national and local groups and forums which oversee Revalidation.

During 2020-21, positive recommendations were made for 182 Doctors in training (64 for GP Trainees and 118 for Hospital Specialty Trainees) bringing the total of positive recommendations for Doctors in training in Northern Ireland since revalidation began to 2,257. There were five recommendations for deferral submitted to the GMC on the basis of insufficient evidence available to enable a positive recommendation. There were no Doctors in training who required notification to the GMC of non-engagement with the revalidation process.

The GMC wrote to Responsible Officers in March 2020 to advise that Doctors who were due to revalidate between 17 March and 30 September 2020 were to be deferred for 12 months. Subsequently, all Doctors with revalidation dates between 1 October 2020 and 16 March 2021 were also deferred by 12 months. Following feedback from Responsible Officers and Doctors, the GMC reviewed their decision and allowed flexibility to make recommendations to revalidate Doctors who were obtaining CCT and required a revalidation recommendation. This has resulted in a significant increase in numbers of Trainees due to revalidate during the 2021-22 year.

## GP Appraisal

All General Medical Practitioners in NI must undergo an annual appraisal to maintain their status on the NI GP Performers' List. NIMDTA co-ordinates and manages the process of GP Appraisal in NI and works in partnership with DoH and HSCB under the guidance of a Central Board of Management. The governance arrangements are underpinned by a Service Level Agreement and a Communications Protocol with the HSCB, which are updated annually.

During the 2020-21 appraisal year, the suspension of GP appraisal due to the COVID-19 pandemic continued until 31 December 2020. Appraisal recommenced on 1 January 2021 for a targeted group of GPs i.e. those GPs with a revalidation date early in 2021 and those GPs who had already missed an appraisal in the 2020-21 year due to the cancellation of appraisals in March 2021 resulting from the COVID-19 pandemic. There were 70 Appraisees in total in this cohort.

The Appraisal team at NIMDTA maintains regular communication with the HSCB Revalidation Team through frequent email and phone contact and formal bi-monthly or quarterly meetings throughout the year. This provides the opportunity for information sharing facilitating the Responsible Officer for General Practice in Northern Ireland to fulfil her statutory role in relation to GP revalidation.

## COVID-19

The pandemic has had a significant impact on every area of NIMDTA's activities, which includes the aims of Goal 3: Measuring the Improvement:

1. "improve outcome measurement and report on the progress for safety effectiveness"
2. "promote the use of accredited improvement techniques and ensure there is sufficient capacity and capability within the HSC to use them effectively."

Among the many educational activities that were stood down or postponed in response to COVID-19, the postponement of quality management visits and surveys directly impacts on NIMDTA's ability to measure outcomes and report on progress for safety effectiveness.

The disruption to formal education, mandatory courses and study leave has reduced NIMDTA's ability to build improvement capacity and capability within the HSC.

**Depending on the course and impact of the COVID-19 pandemic, NIMDTA plans for next year are:**

1. Continue to take a collaborative approach to its **Quality Management responsibilities** seeking to work in partnership with Local Education Providers, QUB, other HSC organisations and national regulators with responsibility for postgraduate clinical education.
2. Proceed with its cycle of planned **Quality Management visits** to training units in local education providers and to GP practices as well as **Quality Management specialty programme reviews**. These visits will be re-designed to take into account precautions necessary to prevent spread of COVID-19.
3. Follow up on concerns and areas for improvement identified from NIMDTA **Quality Management** activities, escalating and reporting to the GMC, DoH, HSCB, PHA and RQIA as necessary.
4. Host a **GMC Annual Engagement Meeting** in September 2021 to discuss NIMDTA Quality Management processes and concerns.
5. Extend the number of specialty programmes appointing SUCCEED Clinical Education Fellows with the aim of **improving Trainee examination results**. This is a component of NIMDTA's SUCCEED Strategy.
6. Continue to work with Trainee Ambassadors in delivering a **Peer Interview Programme** to assist Trainees in preparing for specialty recruitment interviews. This is a component of NIMDTA's SUCCEED Strategy.
7. Liaise with the DoH to support the introduction of development support for **Staff Grade and Associate Specialist (SAS)** Doctors in Northern Ireland when the DoH plans are finalised.
8. Highlight the work of the **Placement Quality** work-stream through presentations at the National Education Scotland (NES) Conference in May 2021 and the Royal College of Obstetrics and Gynaecology World Congress in June 2021.
9. Work with DoH, HSCB, PHA and HSC Trusts to ensure that **restart of postgraduate medical and dental education** post-pandemic is fully integrated into HSC plans to rebuild clinical services.

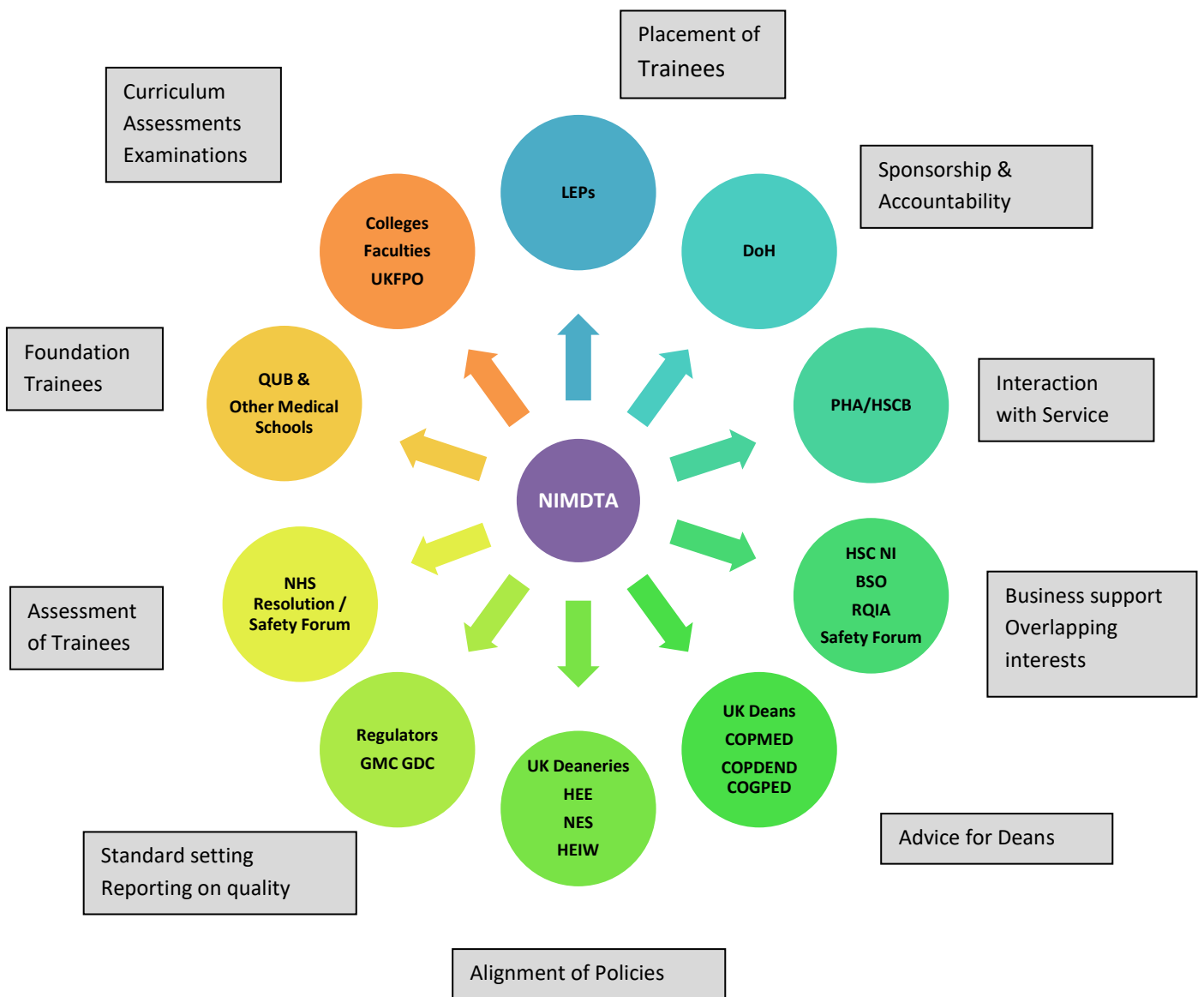


## Goal 4: Raising the Standards

**Quality 2020 Aim:** We will establish a framework of a clear evidence-based standards and best practice guidance. We will establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review.

### Partnership Arrangements

To carry out its roles effectively, NIMDTA needs to work closely with the following stakeholders:



## NIMDTA Contributions

NIMDTA contributes to the development, dissemination and promotion of standards and best practice guidelines through the participation of NIMDTA representatives in a wide range of National, GMC, GDC, DoH and Regional groups as detailed below.

During 2020-21, NIMDTA representatives participated in **National** groups and events regarding postgraduate medical and dental education:

- 4 Nation Statutory Education Body Chief Executives' Group
- 4 Nation Statutory Education Body Medical Directors' Group
- Academy of Medical Royal Colleges' (AoMRC) Joint Academy Training Forum
- CoGPED/General Practice Committee Liaison Group
- CoGPED/RCGP Partnership Group
- Committee of General Practice Education Directors (CoGPED)
- Committee of Postgraduate Dental Deans and Directors (COPDEND)
- Conference of Postgraduate Medical Deans (COPMeD)
- COPMED 4 Nation Revalidation Overarching Group
- COPMED 4-Nation Business Managers Meeting
- COPMED Academic Training Forum
- COPMED Overarching Data Group
- COPMED PYA Review Group
- COPMED Professional Support Group
- COPMED Specialty Advisory Committee Review Group
- COPMED Senior Managers' Forum
- COPMeD Senior Managers' Revalidation Best Practice and Development Forum
- Dental Business Managers Meeting
- Dental Core Training Advisory Group
- Dental Foundation Training Advisory Group
- Dental Specialty Training Advisory Group
- GDC DFT Undergraduate Liaison Group
- Health Foundation Q Cohort
- HEE Foundation 4 Nations Policy Group
- HEE Medical Foundation Programme Review
- Irish Clinical Academic Training Programme Steering Group
- MDRS Careers Group
- MDRS Programme Board
- MDRS Recruitment Group
- National Multi-Specialty Conference (NACT)
- RCGP Assessment Committee
- RCGP Curriculum Development Group

- Royal College of Physicians London Postgraduate Deans Liaison Group
- Scottish Medical Education Conference (SMEC)
- UK Foundation Curriculum Group
- UK Foundation Programme Board
- UK Foundation Programme Executive Committee
- UK Medical Education Database Development Group
- UK Medical Education Reference Group.

During 2020-21, NIMDTA representatives participated in working groups and events organised by the **General Medical Council**:

- Curriculum Oversight Group (COG)
- Education and Training Advisory Board
- Equality and Diversity Advisory Group
- Medical Licencing Assessment Programme Board
- NTS Group
- Quality Leads Group
- Review of Wellbeing
- RO Reference Group
- UK Advisory Forum
- Welcome to UK Practice Regional Group.

During 2020-21, NIMDTA representatives participated in **DoH** groups and events:

- Central Medical Advisory Committee
- Collective Leadership Strategy Reference Group
- Confidence in Care Revalidation Delivery Board
- Day Case Elective Care Centre Group
- Emergency Care Regional Collaborative
- Employer Liaison Group
- GP Training Task and Finish Group
- Improving Working Lives of Junior Doctors Group
- Library Advisory Group
- Medical Leaders' Forum
- Privacy Advisory Committee
- Responsible Officers' Forum
- Review of Urgent and Emergency Care Group
- Single Employer Steering Group
- Single Employer Working Group
- Workforce Strategy Steering Group.

During 2020-21, NIMDTA representatives participated in regional groups and events:

- BMA JDC / NIMDTA Liaison Group
- Healthcare Library (QUB)- NIMDTA Liaison Group
- HSC Collective Leadership Strategy Reference Group
- HSC Informal Medical Directors' Group
- HSC Informal Small ALB Chief Executives' Group
- HSC Quality Improvement Forum
- HSC Trust Informal Medical Directors' Group
- Joint QUB-NIMDTA Education Forum
- NI Confederation for Health and Social Care (NICON)
- NI Health & Social Care Postgraduate Education Forum
- NIMDTA Lead Educator Forum
- NIMDTA / PHA / HSCB Liaison Group
- NISHFN
- PHA Medical Directors' Group
- Postgraduate Medical Education Forum
- Quality 2020 Developing Professional Leadership Group
- QUB - NIMDTA Equality and Diversity Working Group
- QUB-NIMDTA Recognised Trainers' Working Group
- QUB-NIMDTA Resilience Working Group
- QUB-NIMDTA-Belfast Trust Clinical Academic Training Board.

### **NIMDTA and Quality 2020**

NIMDTA's Senior Education Manager, Quality Manager and GP Director have all contributed to the Quality 2020 Developing Professional Leadership Group during 2020-21.

The NIMDTA Simulation Lead and NIMDTA ADEPT Clinical Leadership Fellows previously led a Quality 2020 Task – Improving Patient Safety through Multi-disciplinary Simulation and Human Factors Training. During 2020-21, the COVID-19 pandemic led to unprecedented disruption to some aspects of medical training due to the dramatic restructuring of the workforce and the necessary cancellation of educational events. Challenges that have remained include the reduced ability to attend external courses and the significant impact on access to training opportunities for some specialties given the downturn in elective care within LEPS.

The underspend in the NIMDTA study leave budget (2020-21) that resulted from travel restrictions and the suspension of educational courses provided a unique opportunity to try to mitigate the risk posed by reduced training opportunities. Simulation-based medical education utilises simulation aides to replicate clinical scenarios and is a growth area in postgraduate medical education and training. The NIMDTA Hospital Specialty Training Committee worked with the Lead Educators to



determine what educational resources could be funded to support simulation training. Resources were then purchased for the Schools of Medicine, Surgery, Obstetrics and Gynaecology, Paediatrics, Emergency Medicine and Diagnostics. The recent appointment of the NIMDTA Lead Educator for Simulation will aid the co-ordination of



simulation training across the region and feedback on the utilisation of the resources purchased will be obtained through Specialty School reviews and Lead Educator Quality Reports in 2021-22.

NIMDTA was also successful in a bid for funding from the Department of Health for 10 Dental Simulation units, to be housed in NIMDTA. The units will be used as part of the training programmes for FDs and DCTs, commencing in September 2021. The Continuing Education team will also use the units to deliver training to General Dental Practitioners.

### **NIMDTA and External Quality Improvement Work**

The Postgraduate Medical Dean, GP Associate Director for Career Development, Associate Postgraduate Dean for Careers and Professional Support and Postgraduate Dental Dean are all members of the Health Foundation's Q Initiative. This initiative aims to make it easier for

people from all parts of the health care system to enhance their skills in QI and make tangible benefits for patients.

### NIMDTA and External Views

NIMDTA has recruited a team of 18 Lay Representatives to provide external scrutiny and contribute to a number of different Deanery activities. These activities included recruitment and selection panels, assessment panels (ARCP), Deanery visits and appeal panels.


All Lay Representatives are required to prepare a report for NIMDTA on the processes and outcomes of the activity that they took part in.

A training event for Lay Representatives was held on 2 November 2020 when 14 Lay Representatives attended.

NIMDTA seeks externality by inviting Educators from other parts of the UK to observe and

participate in Deanery visits to educational units, in annual review panels to assess progress of Trainees and for ARCP appeal panels. Each of these external representatives is asked to prepare a report for the Postgraduate Medical Dean on the process and outcomes of the activity that they took part in.

NIMDTA receives information from the GMC annually on how NIMDTA Trainees perceive training in NI compared with other regions of the UK (GMC NTS) and on how well NIMDTA Trainees progress through their training (ARCP), succeed at examinations or succeed in their applications to enter specialty training.



**Lay Representative Meeting**

**Monday 02 November 2020 at 2.00pm**  
**Online via Zoom: [meeting link](#)**

**Facilitators**  
 Dr Ian Steele, Acting Postgraduate Dean, NIMDTA  
 Ms Roisin Campbell, Senior Professional Support Manager, NIMDTA  
 Ms Denise Hughes, Senior Education Manager, NIMDTA

**Programme**

Update on the impact of COVID on Postgraduate Training <ul style="list-style-type: none"> <li>▪ Changes within the organisation</li> <li>▪ Staff Transition</li> <li>▪ New developments resulting from COVID</li> <li>▪ Proposed changes to the Quality Management Process</li> </ul>	Dr Ian Steele  Ms Roisin Campbell  Ms Denise Hughes
What are the challenges for lay reps contributing to NIMDTA processes remotely?  Feedback from lay reps recently involved in recent processes.	<i>Breakout Session</i>
How can we utilise lay representatives input into our processes going forward?	<i>Group Discussion</i>
Closing Remarks	Dr Ian Steele

## General Medical Council

NIMDTA, as the Northern Ireland Deanery, is required to demonstrate compliance with the GMC standards for postgraduate medical training (Promoting Excellence) and must satisfy itself that LEPs, primarily HSC Trusts, deliver postgraduate medical education and training to the standards required. NIMDTA carries out its quality management role through the conduct of Deanery Visits, the review of reports and action plans and the evaluation of Trainee surveys and assessment outcomes.

NIMDTA is required to report to the GMC online through a live reporting method. This reporting from the Deanery is used by the GMC with other sources of information to monitor the quality of postgraduate medical education and training and ensure that the GMC standards for training are being met.

Any risks or areas of concern identified by the Deanery relating to the quality of training or patient safety are further reviewed in the context of the results of the GMC's annual NTS which provides feedback on Trainee's perception of the quality of their training.

The GMC, as part of its quality assurance processes, conducts scheduled visits to Postgraduate Deaneries and designated LEPs. It also carries out Enhanced Monitoring visits to LEPs if there are any significant areas of concern. In 2020-21, there was one concern subject to this process within NI. Details of the issues being monitored in this fashion are published on the Enhanced Monitoring section of the GMC website at <https://www.gmc-uk.org/education/how-we-quality-assure/postgraduate-bodies/enhanced-monitoring>

## Internal Audit

NIMDTA utilises an outsourced internal audit function which operates to defined standards and whose work is informed by an analysis of risk to which the organisation is exposed and annual audit plans are based upon this analysis. In 2020-21 Internal Audit reviewed the following systems:

DEFINITION OF LEVELS OF ASSURANCE	
The Level of Assurance that Internal Audit can provide on audit areas is defined as follows:	
Assurance	Definition
Satisfactory	Overall there is a satisfactory system of governance, risk management and control. While there may be some residual risk identified, this should not significantly impact on the achievement of system objectives.
Limited	There are significant weaknesses within the governance, risk management and control framework which, if not addressed, could lead to the system objectives not being achieved.
Unacceptable	The system of governance, risk management and control has failed or there is a real and substantial risk that the system will fail to meet its objectives.

## Finance Audits

One finance based audit was conducted in 2020-21:

### **Financial Review 2020-2021**

Internal Audit carried out an audit of financial systems, which was considered by the Audit Committee on 24 February 2021. NIMDTA received a Satisfactory level of assurance in relation to income, non-pay expenditure, payments to staff, human resources processes; Supplier File amendments and control over COVID-19 expenditure. The report contained no Priority 1 findings and three Priority 2 findings. An action plan has been developed in order to implement the identified recommendations.

## Corporate Risk Based Audits

One corporate risk based audit was conducted in 2020-21:

### **Management of Single Lead Employer Processes 2020-2021**

Internal Audit carried out an audit in relation to the Management of Single Lead Employer Processes. This will be considered by the Audit Committee at the first meeting in 2021-22. NIMDTA received a limited level of assurance with one Priority 1 and seven Priority 2 findings. NIMDTA accepted all of the recommendations and developed an action plan to address the findings. The action relating to the Priority 1 finding has been completed, as well as in relation to two of the Priority 2 findings. This work will be further reviewed by Internal Audit in September 2021.

## Governance Audits

Two governance audits were conducted in 2020-21:

### **NIMDTA Governance through COVID-19 2020-2021**

Internal Audit carried out an audit in relation to Governance during COVID-19 which was considered by the Audit Committee on 27 February 2021. NIMDTA received a Satisfactory level of assurance that contained no Priority 1 and two Priority 2 findings. An action plan has been developed order to implement the identified recommendations.

### **Complaints Management 2020-2021**

Internal Audit carried out an audit in relation to the Management of Complaints which was considered by the Audit Committee on 15 October 2020. NIMDTA received a Satisfactory level of assurance with no Priority 1 findings. One Priority 2 finding and two Priority 3



findings were noted. An action plan has been developed in order to implement the identified recommendations.

### **NIMDTA and Communication with Trainees**

NIMDTA actively seeks feedback from Trainees and involvement of Trainees in NIMDTA Committees. In 2020-21, a Communications and Training Events Manager was appointed to enhance and improve communication methods with Trainees and Trainers.

NIMDTA engages with and listens to Trainees in a number of ways:


1. NIMDTA Surveys of Trainees. NIMDTA conducts surveys of Trainees before carrying out visits to the units in LEPs that they are allocated to. These surveys inform the Visiting Team and are discussed at NIMDTA's pre-visit briefing sessions with the Visiting Team.
2. GMC Surveys of Trainees. The GMC conducts an Annual National Survey of Trainees. NIMDTA strongly supports the GMC in maximising the response rate of Trainees in NI to this survey. NIMDTA reviews and distributes the results of this survey and provides responses to the GMC. Despite a lower response rate in 2020 due to the COVID-19 pandemic, 86.5% of Trainees completed the survey. In this survey, Trainees raised five patient safety issues and six undermining concerns.
3. NIMDTA visits to LEPs. NIMDTA has a rolling five yearly visiting cycle to visit all the training units in NI. During these visits, NIMDTA meets with Trainees in peer groups to listen to their views in a confidential setting. Concerns raised by the Trainees are discussed anonymously with Trainers and fed back on the day to the Educational and Clinical Leaders in the LEPs and are included in NIMDTA's visit reports.
4. Trainee Representatives. NIMDTA includes Trainee representatives in the membership of the Training School Boards (Foundation, Specialty and GP) and Specialty Training Committees which oversee the delivery of postgraduate medical education in each programme. NIMDTA also includes Trainee representatives in appropriate Sub-Committees (Revalidation Operational Group, and Clinical Academic Training Board).
5. Trainee meetings. NIMDTA Educators meet with individual Trainees to listen to concerns, discuss career choices and provide support.

The Foundation School has an active and well established Foundation Doctors' Forum which promotes inclusion of their views in regional working groups and sends representatives to national meetings thus linking with Foundation Doctors in other regions.


Representatives of this Forum are full members of the Foundation School Board which includes a final year medical student along with two F1 and two F2 Doctors. Issues pertaining to Foundation Doctors are highlighted through this Deanery level reporting structure. The Foundation School links directly with the recruited and selected Foundation Programme Directors based in the LEPs, four times a year.

## Foundation Update

Issue 293# - 29 January 2021



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NIFs  
Foundation School

Click on the blocks below to be linked to their subject.

### Surveys


How prepared do you feel for the role of the 'future doctor'? We would like to invite you to take part in an important research study into the preparedness of medical graduates for the role of the future doctor. [Click here for further information](#)



[Click here to view the latest UKFPO Bulletin](#)

### Special Circumstances Deadline

This is a Final Reminder that the application window for F1's requiring Special Circumstances is 4pm on Friday 29th January 2021.



### Courses/Events

You are invited to attend a virtual 3-Day MRCS Part A revision course from the 12th to 14th March 2021. For further information please visit: [www.smashingeducation.com](http://www.smashingeducation.com)

GPST Courses are holding an extra Zoom Stage 2/MSRA Course on the 31st January 2021 from 9am to 1pm. For further information click here.

The Bristol Patient Safety Conference 2021 is taking place on the 16th June 2021. All Junior Doctors are invited to enter the National Poster Competition before the 9th April 2021. [Click here for more information.](#)

### Alerts

- Updates Guidance on Timing of COVID-19 Vaccine Dosing Interval in Patients due to receive treatment with Immunosuppressants.
- Updates Guidance on Timing of COVID-19 Vaccine Dosing Interval in Patients due to receive treatment with Immunosuppressants.

### Revised ARCP Requirements

The UKFPO has recently confirmed derogations to the ARCP requirements for sign off for Foundation doctors for this academic year ending August 2021. (please see the attached guidance). As a result of this, completion of an ALS / equivalent course is not essential for F2 sign off. Usually we fund Trust ALS and eALS courses to the maximum amounts of £300 and £170 respectively. For some years the independent sector has provided the one day eALS course at a cost of £300, but we have only been able to reimburse £170 towards this.

The COVID pandemic has reduced the availability of courses across all Trusts this year. In addition the number able to attend each course is less, and it is also difficult for F2s to secure time to attend during this very busy clinical time. A recent survey undertaken by NIFs has shown that approximately 160 F2s have not had the chance to attend an (e)ALS course this year. Even though attendance is no longer required for FPCC, we realise how useful these courses are and would like to support any F2s that can still access and attend one whether in the Trust or independent sector.

We are therefore willing to reimburse the full max amount of £300 for any F2 attending an (eALS) course during this academic year only.

### F2 Generic Skills Modules

Date & Time	Module	Venue	Spaces Remaining
05 Feb 2021 09:30	Module 3	Quality Improvement	Zoom 0
09 Feb 2021 09:30	Module 8	Professionalism & GMC Guidance	Zoom 16
12 Feb 2021 09:30	Module 5	Teamwork & Communication Skills	Zoom 0
12 Feb 2021 13:30	Module 5	Teamwork & Communication Skills	Zoom 11
19 Feb 2021 09:30	Module 3	Quality Improvement	Zoom 4
23 Feb 2021 09:30	Module 8	Professionalism & GMC Guidance (last session)	Zoom 24
25 Feb 2021 09:00	Module 7	Ethics/breaking Bad News	Zoom 0
3 March 2021 09:30	Module 5	Teamwork & Communication Skills (last session)	Zoom 0
5 March 2021 09:30	Module 3	Quality Improvement	Zoom 11
25 March 2021 09:00	Module 7	Ethics/breaking Bad News	Zoom 2

NB for Module 5: There are morning and afternoon sessions held on the 12th February 2021 - please make sure if you are booking one of these sessions to book the correct session - AM or PM.

Please do not double book modules!!

I want to

Book a Module

Cancel a Booking

See All Dates

The NIMDTA Foundation School introduced a Foundation Update from August 2014. This is circulated to all F1 Doctors, F2 Doctors and Foundation contacts. The objective of the Foundation Update is to streamline communication and bring key information to the attention of these groups. All information is presented in 'bite-sized' chunks relating to current issues relevant to front line healthcare staff. The information is confined to one A4 page and contains the key weekly messages relevant to all involved in Foundation Programme training in Northern Ireland.

Regular features include topics such as Foundation e-portfolio and ARCP reminders, healthcare news and information alerts, Foundation and Specialty Recruitment information, Regional Generic Skills mandatory training information for all F2 Doctors, information relevant to Foundation Programme Trainers, GMC updates, Northern Ireland regional initiatives, academic opportunities, educational meetings and celebrating the success of current and past NIFS Foundation Doctors.

There are also NIMDTA Newsletters for GP, Core Medical, Paediatric and Hospital Specialty Trainees and Dental Trainees.

**Specialty Trainee Newsletter**  
October / November 2020

Northern Ireland  
**mdta**  
Medical & Dental Training Agency

**Guest Editor: Dr Michael Goggin, ST7 Care the Elderly**

**Trainee research day – 5<sup>th</sup> November 2020**

Are you considering a career in research or just thinking about it? Why not attend the QUB, UMS and NIMDTA sponsored online half day event to find out more?  
All Foundation, Medical specialty, Dental Core and Specialty, and GP trainees welcome!  
Download the programme [here](#) for more information.

**COVID and your ARCP**  
As COVID continues to impact Specialty training the Statutory Education bodies have proposed an [extension](#) to the arrangements made to apply to all ARCPs, use of the COVID Outcomes 10.1 and 10.2 and ARCP appeals in a similar way. They will now apply to ARCPs scheduled up to and including March 2021.

**FLU**  
Its that time of year again...Have you been vaccinated yet? This is more important than ever following the devastating effects of the COVID-19 pandemic. As usual, all the trusts will be offering the vaccination to their staff.

**Why should you bother with vaccination?**

- Did you know? All Health and Social Care workers are **FOUR** times more likely to come into contact with the virus compared with the general population.
- By getting the vaccination you protect not only yourself but your patients, work colleagues, friends, family and ultimately the health service itself.
- Vaccination of health care workers against influenza has been shown to lower rates of influenza like illness, hospitalisation and mortality in the elderly in health and social care.

**New Interim Post Graduate Dean appointed...**  
Prof. Keith Gardiner has recently retired and stood down from his role as Post Graduate Dean at NIMDTA. We wish him well and say thanks for all his hard work. Dr Ian Steele will take over as Interim Post Graduate Dean until a permanent appointment is made.

**DCT Newsletter**  
December 2020

Northern Ireland  
**mdta**  
Medical & Dental Training Agency

Welcome to the Dental Core Training Newsletter. This Newsletter is designed to support your training and reinforce information as well as keep you up to date with any changes or new happenings in your training year. We appreciate any feedback you might have about the newsletter as well as suggested items to include.

**DCT Rep**  
My name is Tom Murphy and I am the Dental Core Training Rep for 10/10/2021. I completed my dental degree in Queens University, Belfast. I then moved to Liverpool where I carried out my dental foundation training, as well as being the Rep for my foundation scheme. I moved back to Northern Ireland to complete my DCTI in Maxillofacial Surgery and I am now working in Altnagelvin Hospital doing my DCT2. Outside of work I enjoy playing rugby and working on cars/DIY. I hope everyone has a great DCT year and please let me know if there is anything I can do to help!

**WELCOME**  
Congratulations and welcome to Melissa Good on her appointment as Training Programme Director for Dental Core Training. As DCT TPO Melissa co-ordinates the training programme for DCTs, including ensuring the programme meets national curriculum requirements. Melissa also provides support for trainees and their educational supervisors in receiving appropriate training for their role and also highlights educational development opportunities.

**SE Trust Shadowing Placement**  
We are delighted the PD shadowing programme is in its 2nd year!  
If PDs have been allocated a day in the Ulster Hospital (in N pairs)  
This is to allow PDs to explore a hospital based career as an option. The taster allows them to visit an OMFs unit where they meet their DCT colleagues, shadow their clinical activities for a day which includes experiencing ward, emergency, theatre and outpatient components.  
It's intended to inform PDs of what it entails to work as a DCT in OMFs. It also invites them to reflect on their attendance.  
Please don't hesitate to contact James Cunningham, OMFs Specialty Doctor, Ulster Hospital and Eiad Qudairat, Associate Postgraduate Dental Dean if you have any queries.

**RESEARCH GRANTS AND FELLOWSHIPS**  
Closing date: Friday 21 January 2021 at 5pm

Two Fellowships are being offered:  
**Ulster 2021 Research Awards (Orthodontics Society Specialty Fellowships)**  
This will normally be awarded for up to one year each, intended to support clinical trainees in orthodontics who wish to further their academic and research training.

**Joint PDs British Society of Aesthetic Dentistry pump-priming grants**  
Two pump-priming grants are being offered to support research into the oral health of children in the broadest sense.

**Joint PDs British Society for the Advancement of Anaesthesia in dentistry pump-priming grant**  
Intended to support research designed to benefit community or population oral health, and should be related to the field of oral surgery.

**PDs pump-priming grants**  
Up to £10,000 each, designed to meet research consumable costs for new or existing projects.

**COVID-19 pump-priming grant**  
Up to £10,000 each, designed to meet research consumable costs for new or existing projects specifically related to COVID-19.

Details and applications  
[www.rcseng.ac.uk/dfs/research](http://www.rcseng.ac.uk/dfs/research)

## General Medical Council Curriculum Oversight Group (COG)

Dr Ian Steele is a member of the GMC COG along with HEE, NES and HEIW representatives and the Departments of Health educational policy leads in the four nations. COG was created by the GMC in response to the GMC *Excellence by Design* document. COG ensures that the three yearly cycle of curriculum reviews delivers the strategic change required and that the curricula written by the Royal Colleges and Faculties are aligned with the *Shape of Training* principles.

## NIMDTA and Trainee Opportunities

NIMDTA works closely with QUB to promote opportunities for Clinical Trainees to undertake academic training, to be involved in scholarly activity and to present their research work. In November 2020, NIMDTA partnered with QUB and the Ulster Medical Society (UMS) to promote and organise a very successful Research for Clinicians Day for the sixth consecutive year. The QUB / NIMDTA Director for Clinical Academic Training Programme, Dr Richard Turkington, chaired the event and prizes were presented to Trainees for the best poster and best oral presentations.



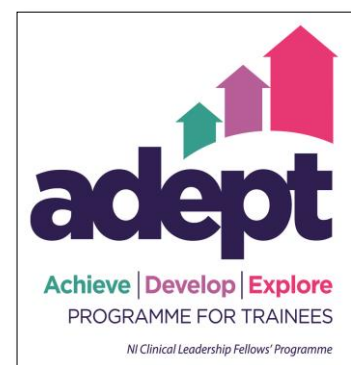
## NIMDTA Clinical Leadership Fellows' Programme (ADEPT)

NIMDTA in cooperation with partner host organisations in Northern Ireland launched a Clinical Leadership Fellows' programme for the first time during the training year 2015-16.

This programme provides senior Doctors and Dentists in Training with an opportunity to take time out of programme for one year to work in an apprenticeship model with senior leaders in host organisations in Northern Ireland to gain organisational and leadership skills.

Clinical Leadership Fellows undertake one or more specific projects in their host organisations under supervision, attend formal leadership training including mentoring and coaching, and are provided with opportunities to network and learn with healthcare colleagues.

In addition to the specific projects, other host-based opportunities include attending and chairing meetings and working with multi-professional teams on a wide variety of other



projects in their host organisations. The number and range of projects in which the Clinical Leadership Fellow is involved depends on the host organisation.

The aims of this programme are that Clinical Leadership Fellows will, by the end of their placement, have gained experience and an understanding of the following:

1. How the HSC works so that they can be more effective as leaders and managers and work in partnership with other leaders and managers;
2. The strategic vision of health and social care in NI and the factors that influence this strategy;
3. The ability to identify leadership and management styles and how to employ those styles;
4. The relationship between clinical practice and service management;
5. Thinking differently through reflective practice;
6. Effective leadership and management of projects;
7. Enabling others through working in a management role;
8. Working in teams from a variety of stakeholders;
9. Networking with senior colleagues facing similar challenges; and
10. Influencing and negotiating skills.

The fifth cohort of ADEPT Clinical Leadership Fellows expected to complete their programme at the start of August 2020. ADEPT Fellows returned to clinical work for the period April to June as part of the HSC response to COVID-19. Twelve Fellows have been successful in achieving a Level 7 Certificate in Leadership from the Institute of Leadership and Management (ILM) and presented their projects at a virtual event with the HSC Leadership Centre. Three fellows resumed their fellowships in August 2020 and completed these in January 2021. The Fellows have joined the ADEPT AlumNI network which is comprised of current and previous ADEPT fellows and provides the opportunity for further development of leadership skills.

Recruitment to the sixth cohort, due to commence in August 2020 was cancelled due to the impact of the COVID-19 pandemic. Recruitment took place in March 2021 for the sixth cohort to start in August 2021. Subsequently, work is ongoing with the Faculty of Medical Leadership and Management and the HSC Leadership Centre to develop an online Leadership Development Programme in 2020-21.

## Trainee Ambassadors



The Ambassador Scheme has been developed as a component of the VALUED Strategy with the overall aims of:

- Promoting connections between Trainees;
- Highlighting benefits of training; and
- Strengthening the engagement between NIMDTA and Trainees.

Ambassadors acquire new skills and are supported in their role through regular meetings at NIMDTA. Ambassadors are initially appointed for a one year period, with the option to continue in post after this if desired and with support of their Educational Supervisors.

In 2020-21, there were two Trainee Ambassador meetings with NIMDTA in the absence of an ADEPT Clinical Leadership Fellow for the VALUED strategy to discuss progress with initiatives, events and to engage with Trainees. It is anticipated that further recruitment will occur to the programme in 2021-22.

The **ENGAGE** Clinical Leadership programme was delivered for a fifth successive year in 2020-21. This programme is focused on leadership and QI methodologies and is aimed at final year Trainees in GP, Hospital Specialty and Dental Specialty training programmes.

ENGAGE aims to challenge, develop and support Doctors and Dentists in Training to ensure that they are prepared to lead effectively. This programme was delivered on behalf of NIMDTA by the HSCLC online and participants will complete the year with a Showcase Event in June 2021.

The **General Practice Annual Day of Celebration** took place in 2020-21 as a

**HSC Leadership Centre** **ENGAGE** Northern Ireland **nimdtā**  
 A Clinical Leadership and Improvement Programme

**Introduction**  
 The Northern Ireland Medical & Dental Training Agency in collaboration with the HSC Leadership Centre are pleased to announce applications are open for the ENGAGE Clinical Leadership and Improvement Programme for Final Year GP, Dental and Specialty Trainees across Health and Social Care in Northern Ireland. Following on from the success of the previous programmes 30 places will be offered. The programme is open to trainees who are within 6 to 18 months of OCT at the time of the first module. The programme is completely free of charge to trainees.

**Programme Details**

- Module 1 - Me as a Clinical Leader (Monday 5<sup>th</sup> Oct 2020, 7pm – 9pm)
- Module 2: Inspiring Shared Purpose (Monday 9<sup>th</sup> Nov 2020, 7pm – 9pm)
- Module 3: Emotional Intelligence (Friday 4<sup>th</sup> Dec 2020, 9.30am-12.30pm)
- Module 4: Maximising Your Impact (Wednesday 3<sup>rd</sup> Mar 2021, 9.30am – 12.30pm)
- Module 5: Building Personal Resilience (Monday 29<sup>th</sup> Mar 2021, 7pm – 9pm)
- Module 6: Engaging the Service User (Monday 26<sup>th</sup> Apr 2021, 7pm – 9pm)
- Module 7: Personal Leadership (Monday 10<sup>th</sup> May 2021, 7pm – 9pm)
- Showcase Event (7th June 2021, 7pm – 9pm)

All modules will be delivered through Zoom

**PROGRAMME AIM**  
 To support the achievement of the primary leadership and improvement goal, that is, 'continual and never ending improvement of the well-being of patients and other service users'. (Don Berwick, 2013) This Clinical Leadership and Improvement Programme has as its foundation Value Based Leadership (Harry M Kraemer). It aims to challenge, develop and support doctors to ensure they are prepared to lead effectively so they can influence, shape and improve the delivery of high quality patient-centred care in their organisations and across the Health and Social Care System.

**LEARNING OUTCOMES**

- Greater collaboration internally and externally with a culture of shared experiences, expertise and support in the pursuit of providing the best care to patients
- Enhanced personal and professional effectiveness through a greater self-awareness and understanding of individual behaviours and their impact on others
- Strengthened resilience to enable positive and collective leadership and improvement in an increasingly dynamic and turbulent environment
- Extended strategic understanding of Health and Social Care and greater capability to deliver transformational change
- Understanding the language, tools and skills of improvement science
- Successful implementation of quality improvement initiatives within their organisations

**KEY PRINCIPLES**

- Learners have different personalities and learning styles. Delivery methodologies will be experiential, engaging, providing challenge and leading to action and review. The programme is designed with the following underlying principles:
  - We will develop medical leaders and improvers who add value to their organisations
  - We will engage with experienced and respected leaders and improvers in General Practice, Dentistry and Hospital Medicine as role models and contributors
  - We will utilise a range of evidence based theories, models and development methods
  - We will respond to the emergent learning needs of the participants
  - We will focus on learning and practical application
  - We will challenge participants both in terms of knowledge and behaviours
  - We will evaluate participants' knowledge, skills, competence and confidence before, during and after the programme

**MODULE STRUCTURE**

- The first two modules are about individuals having the mindset and strength to lead improvement and change within their healthcare environment.
- Building on this the next three modules explore how knowing ourselves and our preferences can improve how we work with others.
- The final two modules are clearly focused on how to work collaboratively and system wide to improve services whilst understanding the strategic context.
- The programme has been updated to reflect the challenges presented by the Covid-19 pandemic

COVID-19 reflection evening. Trainees, Trainers and Programme Directors were asked to submit clinical innovations, wellbeing events, stories and learning from their experience of the pandemic. An online conference was held on 25 June 2020 in the absence of the annual EQUIP celebration event and invited participants to celebrate the work of GP Trainees in the training year 2019-20.

**DR BLÁTHNAID CARLIN**  
Waterside Medical Practice  
Southern Area Group

When starting out in my medical career, it never crossed my mind that I would be working in the midst of a pandemic. COVID-19 has given a whole new meaning to the term 'life-long learning'. I expected to be continually learning throughout my medical career, but having to learn about a completely brand-spanking new virus? That thought never struck me for a single second.

I have learned a lot throughout this pandemic. It has certainly been a rollercoaster of emotions for all of us.

I have learned that stress and worry can bring out the best in some and the worst in others.

I have learned that nothing replaces human interaction. Whether a face to face consultation, a handshake or a loving hug with a family member. We humans were definitely made to be tactile beings.

I have learned that there are two groups of thinkers. The thinkers that focus on problems and leave it at that and those who can see the problems but focus on solutions.

I have learned that during the tough times there are always helpers, always those doing good, always those going above and beyond and always those going the extra mile for the greater good.

I also believe this pandemic has forced the world to waken up and reflect on how we have chosen to live our lives. One example would be the way we have continually taken our planet for granted, living selfish and wasteful lives. The worldwide lockdown has given the Earth time to heal. However our fight against climate change continues and will continue once this pandemic has passed, and this pandemic will pass. We won't be able to socially distance or isolate at home when climate change hits crisis point.

I also believe this pandemic has forced us all to reflect on our dependence on devices and our screen use. I think the lockdown has led us all to appreciate just how completely different interactions are in real life compared to interactions through a device. Facetime is just not the same as time, face to face. Having experienced that feeling when our choice to interact with family and friends was forbidden and forcibly removed. I am hopeful that going forward we don't ever take that for granted again.

I think the most important thing I have come to realise is the importance of the simplest and most meaningful gestures. Things we take for granted but in actual fact, are the most important things of all.  
A smile. Never underestimate the power of a smile.  
Kindness. Practicing medicine with kindness instead of defensiveness.  
Caring. Ensuring patients feel cared for. Not just 'medically managed' but truly cared for, listened to and heard.  
Ensuring our patients go away feeling reassured and not burdensome.  
Treating patients the way we would like to be treated ourselves, how we would want our families to be treated.

As doctors our jobs are hard, draining, rewarding, exhausting but going to work every day knowing you will help someone...whether that is helping them through a pandemic, a sporting injury or the most trying and difficult times of their lives...that is and will continue to be a privilege.

**DR DAVID MCCARTHY**  
Springvale Medical Practice, Belfast Area Group

During a time of great unrest, teamwork within general practice has come to the fore of successful medical care. With challenging and often isolated days focusing on telephone consulting with limited patient contact, I have greatly appreciated the joy and laughter of all colleagues. One firm memory which will remain will be when one of the receptionist staff members opened a long awaited delivery of PPE. She was unaware as to the preciousness of this resource at the time and thought it would lighten the mood to put on the gown and hat and to parade around as one of the doctors. This brought levity in a difficult environment at the time but not as much as when the practice manager found out and proceeded with great speed to chase her down the stairs asking her what she had done and why. The camaraderie and adaptability of the team collective is a resource for which general practice within Northern Ireland should be proud.

**"THE CAMARADERIE AND ADAPTABILITY OF THE TEAM COLLECTIVE IS A RESOURCE FOR WHICH GENERAL PRACTICE WITHIN NORTHERN IRELAND SHOULD BE PROUD."**

## COVID-19

The pandemic has had a significant impact on every area of NIMDTA's activities, which includes the aims of Goal 4: Raising the Standards:

1. "establish a framework of a clear evidence-based standards and best practice guidance"
2. "establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review."

Many educational activities were stood down or postponed and postgraduate Educators stepped down from educational roles to support the clinical response to the pandemic.

In response to COVID-19, many of the regular opportunities for NIMDTA to engage with the DoH, HSCB, PHA and HSC Trusts were cancelled or postponed. This had a detrimental effect on the dynamic partnerships that NIMDTA had established regionally.

NIMDTA set up a new group with the HSC Trust colleagues to oversee the introduction into the HSC of new FiY1 Doctors who had graduated early and registered with the GMC at an earlier stage than normal. A new group was also set up focused on the return of Out of Programme Doctors into full time clinical work and on the redeployment of Trainees across specialty boundaries, into different units and hospital sites to support the HSC response to COVID-19.

**Depending on the course and impact of the COVID-19 pandemic, NIMDTA plans for next year are:**

1. The **Sixth EQUIP Celebration Day** for GP Trainees will be delivered in June 2021. EQUIP is a QI Programme for GP Trainees which aims to give Trainees an opportunity to learn about QI by undertaking a QI project within groups underpinned by introductory theory, training in QI tools and mentorship from local QI leaders using the ECHO collaborative training model.
2. Convene its **Fifth ENGAGE Showcase Event** in June 2021. This will be an opportunity for Trainees to present the QI projects that they have been involved in during their participation in the ENGAGE programme.
3. In collaboration with QUB, NIMDTA has organised its **10th Annual Clinical Education Day** for Friday 10 September 2021 online and is aimed at undergraduate and postgraduate teachers, Trainers and Educators.
4. In collaboration with QUB and UMS, NIMDTA has again organised a **Research for Clinicians Day** on 04 November 2021 online.
5. In collaboration with QUB, NIMDTA has organised for the sixth year an **Annual Professional Support Conference** on 22 April 2021 online.
6. Work with DoH, HSCB, PHA and HSC Trusts to ensure that restart of postgraduate medical and dental education post-pandemic is fully integrated into HSC plans to rebuild clinical services



## Goal 5: Integrating the Care

*Quality 2020 Aim: We will develop integrated pathways of care for individuals. We will make better use of multidisciplinary team working and shared opportunities for learning and development in the HSC and with external providers.*

While NIMDTA is not directly involved in delivery of care for individuals, NIMDTA is involved in multi-disciplinary transformation working groups (Leadership Strategy Reference Group; Review of Urgent and Emergency Care, and the Daycase Elective Care Centres Project Board) and IHRD Recommendation Implementation Groups.

NIMDTA promotes multi-disciplinary team development through the Dental Continuing Education (CE) programme for Dentists, DCPs and for Dental Teams. The September 2020 - March 2021 CE Programme was attended by 349 dental registrants. It is planned that as part of our 4-day Hands-On Oral Surgery Course, in November 2021, the participating dentists can bring their dental nurses to attend a competency based Oral Surgery and Suture Removal course. A number of additional hands on educational opportunities for both Dentists and DCPs are planned for 2021-22. The 'Dental Foundation Dental Nurse' course as piloted in the 2019-20 training year will be offered again from September 2021.

NIMDTA runs generic skills training sessions for its 252 Foundation Year 2 Doctors and for 1,100 Specialty Trainees on multi-disciplinary team working.

In September 2018, NIMDTA met with Leaders from NIPEC, the Clinical Education Centre (BSO), NI Centre of Pharmacy Learning and Development, HSCB and DoH to form the multi-professional **Northern Ireland Health & Social Care Postgraduate Education Forum**. The aim of this forum is to facilitate strategic discussions concerning inter-professional education across the HSC and promote cross-organisational relationship, understanding and collaborative working. Representatives from the HSC Leadership Centre now attend the forum and meetings continue to be held bi-annually.

### COVID-19

The pandemic has had a significant impact on every area of NIMDTA's activities, which includes the aims of Goal 5: Integrating the Care:

1. "develop integrated pathways of care for individuals"
2. "make better use of multidisciplinary team working and shared opportunities for learning and development in the HSC and with external providers."

NIMDTA supported the HSC response to COVID-19 in four ways:

1. **Stepping Up.** NIMDTA worked closely with the GMC, QUB and DoH to facilitate the early graduation, registration and entry into the HSC workforce of 212 FiY1s. To support the introduction of the FiY1 initiative in NI, NIMDTA established the FiY1 Progress Group with representation from QUB to consider the allocation process, induction and support of Trainees appointed to this programme. A NIMDTA/Trust Human Resources working group was also developed to support and facilitate the implementation of this initiative at an operational level.

A Regional Induction Programme was designed and delivered as a series of online presentations facilitated by Project Echo in advance of all FiY1s commencing. Local induction programmes were also developed in conjunction with Trust Foundation Programme Directors. In May 2020, 213 FiY1 Doctors were allocated regionally across the five HSC Trusts. This group of new Trainees commenced work in late May 2020 and continued to support the response to the pandemic until July 2021.

2. **Stepping Back.** Over 30 Academic Trainees and Out of Programme Trainees undertaking research at QUB, leadership training in HSC organisations and sub-specialty fellowships stepped back into full time clinical work in the Trusts. Following agreement at the Chief Executives Forum, the Trainee Redeployment Group was established to enable NIMDTA and LEPs to work in partnership to develop the principles and approach to redeployment of Trainees to support the wider healthcare system during pandemic surges.
3. **Stepping Sideways.** Hundreds of Trainees along with their more senior colleagues were redeployed across specialty boundaries, into different units and hospital sites showing engagement, flexibility and willingness to support the HSC. During the initial phase of the pandemic, there were a large number of Trainees identified for redeployment (circa 300) from their usual post to the areas where there was expected to be greatest clinical need (e.g. Emergency Departments; Intensive Care Units; Acute Medical Units). The redeployments during this period were gradually reversed as the number of cases of COVID-19 decreased at the start of summer 2020.

Following review of this first period, development of principles for redeployment and consultation with Trainees, 160 Trainees were identified for redeployment during the second surge. Trainees in Academic posts and General Practice were not moved during this period. Information was transferred between NIMDTA and Trusts for all rotations between August 2020 and April 2021, information was collated for Trainees who were categorised as Clinically Extremely Vulnerable and the personal impact to them at this time.

4. **Stepping Down.** Many educational activities were stood down or postponed and postgraduate Educators have stepped down from educational roles to support the

clinical response to the pandemic. In June 2020, an internal Facilitating Online Learning and Development Task and Finish Group was established to consider how postgraduate medical and dental education should be planned, developed and delivered regionally for Trainees and Trainers using digital technology to support online learning and development. An internal Business Case was submitted and approved by SMC for a Moodle based Learning Management System (LMS) to meet NIMDTA's requirements until the regional system is in place.

**Depending on the course and impact of the COVID-19 pandemic, NIMDTA plans for next year are:**

1. Continue to participate in the **Daycase Elective Care Centres Project Board**.
2. Be represented at the **NICON Conference** in October 2021 by Educators, Senior Management and ADEPT Fellows.
3. Be represented at the **HSC Single Employer's** Steering Group by the Postgraduate Medical Dean, Director of Hospital Specialty Training and Senior Manager for Trainee Employment.
4. Be represented at the **HSC Single Employer's** Working Group by the Chief Executive, Senior Education Manager, Senior Professional Support Manager and the Senior Manager for Trainee Employment.
5. Be represented on the **4 Nation Statutory Education Body Chief Executives' Group** by the Chief Executive, Medical Director's Group by the Postgraduate Medical Dean and on the **Senior Manager's Group** by the Senior Education Manager.
6. Work with DoH, HSCB, PHA and HSC Trusts to ensure that **restart of postgraduate medical and dental education** post-pandemic is fully integrated into HSC plans to rebuild clinical services.

## References

COGPED: Committee of GP Education Directors

<http://www.cogped.org.uk/>

COPDEND: UK Committee of Postgraduate Dental Deans and Directors

<http://www.copdend.org/>

COPDEND: Quality Development of Postgraduate Dental Training in the UK 2012

[http://www.copdend.org/content.aspx?Group=guidance&Page=guidance\\_quality%20development%20of%20postgraduate%20dental%20training%20in%20the%20uk%202012](http://www.copdend.org/content.aspx?Group=guidance&Page=guidance_quality%20development%20of%20postgraduate%20dental%20training%20in%20the%20uk%202012)

COPDEND Standards for Dental Educators

<https://www.copdend.org/wp-content/uploads/2018/08/Guidelines-for-Dental-Educators-.pdf>

COPMED: Conference of Postgraduate Medical Deans of the UK

<http://www.copmed.org.uk/>

GDC Standards in Specialty Education

[https://www.gdc-uk.org/docs/default-source/quality-assurance/dental-specialty-training/standards-for-specialty-education-201977467198-fcec-48a0-8a88-a09b66d1e661.pdf?sfvrsn=28b5d2b1\\_5](https://www.gdc-uk.org/docs/default-source/quality-assurance/dental-specialty-training/standards-for-specialty-education-201977467198-fcec-48a0-8a88-a09b66d1e661.pdf?sfvrsn=28b5d2b1_5)

GMC Quality Assurance Framework

<http://www.gmc-uk.org/education/qaf.asp>

GMC Promoting Excellence

<https://www.gmc-uk.org/education/standards-guidance-and-curricula/standards-and-outcomes/promoting-excellence>

GMC Excellence by Design

[https://www.gmc-uk.org/-/media/documents/Excellence\\_by\\_design\\_standards\\_for\\_postgraduate\\_curricula\\_0517.pdf\\_70436125.pdf](https://www.gmc-uk.org/-/media/documents/Excellence_by_design_standards_for_postgraduate_curricula_0517.pdf_70436125.pdf)

GMC Good Medical Practice

<https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-Doctors/good-medical-practice>

Foundation Reference Guide and Foundation Curriculum

<https://foundationprogramme.nhs.uk/curriculum/>

A Guide to Postgraduate Specialty Training in the UK (Gold Guide Eight Edition)

[https://www.copmed.org.uk/images/docs/gold\\_guide\\_8th\\_edition/Gold\\_Guide\\_8th\\_Edition\\_March\\_2020.pdf](https://www.copmed.org.uk/images/docs/gold_guide_8th_edition/Gold_Guide_8th_Edition_March_2020.pdf)

Shape of Training: Securing the future of excellent patient care

[https://www.shapeoftraining.co.uk/static/documents/content/Shape\\_of\\_training\\_FINAL\\_Report.pdf\\_53977887.pdf](https://www.shapeoftraining.co.uk/static/documents/content/Shape_of_training_FINAL_Report.pdf)

## Abbreviations

ACF	Academic Clinical Fellows
ACL	Academic Clinical Lecturers
ADEPT	Achieve, Develop, Explore Programme for Trainees
ALB	Arm's Length Bodies
AoMRC	Academy of Medical Royal Colleges
APLAN	Anonymous Peer Learning and Assessment Network
ARCP	Annual Review of Competence Progression
ASPiH	Association for Simulated Practice in Healthcare
BMA	British Medical Association
BSO	Business Services Organisation
CCT	Certificate of Completion of Training
CE	Continuing Education
CMO	Chief Medical Officer
COG	GMC Curriculum Oversight Group
COGPED	Committee of General Practice Education Directors
COPDEND	Committee of Postgraduate Dental Deans and Directors
COPMED	Conference of Postgraduate Medical Deans
CPD	Continuing Professional Development
CDFT	Committee on Dental Foundation Training
DCP	Dental Care Professional
DCT	Dental Core Training
DEMEC	Developing Excellence in Medical Education Conference
DFT	Dental Foundation Trainee
DoH	Department of Health
ECHO	Extension of Community Healthcare Outcomes
ENGAGE	Clinical Leadership and Improvement Programme
EQUIP	Educating for Quality Improvement for GP Trainees
ES	Educational Supervisor
F1	Foundation Year 1
F2	Foundation Year 2
FD	Foundation Dentist
FiY1	Foundation Interim Year 1 Doctor
Form R	Registration Form (for Trainees with NIMDTA)
GDC	General Dental Council
GMC	General Medical Council
GP	General Practice
GPARTS	General Practice Academic Research Training Scheme
HEE	Health Education England
HSC	Health and Social Care
HSCB	Health and Social Care Board
ICAT	Irish Clinical Academic Training
ILM	Institute of Leadership and Management
iQUEST	Improving Quality and Understanding to Enhance Specialty Training
IPC	Infection Prevention and Control
IT	Information Technology

JDC	Junior Doctor's Committee
LDA	Learning and Development Agreements
LEP	Local Education Providers
LMS	Learning Management System
MD	Doctor of Medicine
MDRS	Medical and Dental Recruitment and Selection
MSc	Masters of Science
NACT	National Association of Clinical Tutors
NEBDN	National Examining Board for Dental Nurses
NES	NHS Education for Scotland
NHS	National Health Service
NI	Northern Ireland
NIAS	Northern Ireland Ambulance Service
NICON	Northern Ireland Confederation for Health and Social Care
NIFRS	Northern Ireland Fire and Rescue Service
NIFS	Northern Ireland Foundation School
NIMDTA	Northern Ireland Medical and Dental Training Agency
NIPEC	Northern Ireland Practice and Education Council (for nursing and midwifery)
NISHFN	Northern Ireland Simulation and Human Factors Network
NTS	National Training Survey
O&G	Obstetrics & Gynaecology
PBSGL	Practice-based Small Group Learning
PHA	Public Health Agency
PhD	Doctor of Philosophy
PQ	Placement Quality
PSU	Professional Support Unit
PYA	Penultimate Year Assessment
QI	Quality Improvement
QMG	Quality Management Group
QUB	Queen's University, Belfast
QUBDSLGL	Queen's University, Belfast Dental School Liaison Group
RCP	Royal College of Physicians
RCS (Ed)	Royal College of Surgeons of Edinburgh
RCGP	Royal College of General Practitioners
RO	Responsible Officer for Revalidation
RQIA	Regulation and Quality Improvement Authority
SAC	Specialty Advisory Committee
SAS	Staff Grade and Associate Specialist Doctor
SDR	Statement of Dental Remuneration
SMC	Senior Management Committee
SMEC	Scottish Medical Education Council
SQE	Safety, Quality and Experience
STATUS	NIMDTA'S Recognising Trainers Programme (Selection; Training; Appraisal; Transfer of Data; Underperformance Management; Support)
SUCCEED	NIMDTA's SUCCEED Strategy (Supporting Training, Understanding the Curriculum, Covering the Curriculum, Ensuring Opportunities for All, Enhancing Prospects, Discovering Purpose)

TPD Training Programme Director  
UMS Ulster Medical Society  
VALUED NIMDTA's VALUED Strategy (Voice is Listened to, Applaud & Acclaim Success, Life-Work Balance, Up to Date & High Quality Training, Enhanced Learning Opportunities, Distinctive).